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ABSTRACT

This annotated bibliography, spanning a number of relevant disciplines, contains primarily materials in published scientific literature on refugee mental health. References have been grouped into four major sections. Section 1, Understanding Refugees in Context, provides important background material in five categories: cultural and related information about different refugee or ethnic groups; research on refugee experience and behavior; policy issues; physical health and medical care of refugees; and assimilation, acculturation, and adaptation. Section 2, Specific Mental Health Issues and Refugees, lists resources in the following categories: typical or common mental health problems, disorders, or issues for refugees; assessment and diagnosis; needs assessment; treatment; prevention, promotion, and outreach; mental health service delivery; and training issues and professional development. Section 3, Concerns of Selected Subgroups of Refugees, provides references on the specific issues and needs of children and adolescents, women, and the elderly, along with references describing kinship issues facing refugee families in their country of resettlement. It also contains a category of references on refugees who have been victimized by torture, terror, concentration camps, and/or rape. Section 4, Other Bibliographies on Refugees and Related Topics, includes both published and unpublished bibliographies. A user's guide to the bibliography is included, along with three indices, organized by refugee/ethic group, author, and subject. (TE)

ED308429

AN ANNOTATED BIBLIOGRAPHY ON REFUGEE MENTAL HEALTH

Carolyn L. Williams

Refugee Assistance Program:
Mental Health--Technical Assistance Center
University of Minnesota

CG 021751

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AN ANNOTATED BIBLIOGRAPHY ON REFUGEE MENTAL HEALTH

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Acknowledgments

This bibliography represents the work and contributions of a number of people. It has been a team effort from its inception and would have been difficult, if not impossible, without the help of my colleagues. The bibliography was supported by contract # 278-85-0024 CH from the National Institute of Mental Health (NIMH) to the University of Minnesota for the establishment of a Refugee Assistance Program: Mental Health--Technical Assistance Center (TAC). One of the first projects of TAC was the development of this bibliography.

The principal investigators of the TAC contract, Drs. Amos Deinard, Bruce Downing, and Joseph Westermeyer, not only obtained the needed funding for the bibliography, but provided valuable assistance and support during all the phases of the project. I am especially grateful for their critical reading of the various drafts, suggestions for references and improvements in the format of the bibliography, and obtaining permission for use of copyrighted material. In a similar manner, our NIMH project officer for the TAC contract, Dr. Richard Cravens, not only made the arrangements for the publication of the bibliography, but provided valuable suggestions during its development.

We relied heavily on computerized searches and earlier compilations of the literature. We are most grateful for having permission to do so. The following is a list of the computer searches used in the bibliography:

MEDLINE:	Medical Literature Analysis and Retrieval System Online [Data base]. Bethesda, MD: National Library of Medicine, (1966-1985).
POPLINE:	(POPulation Information onLINE)/Johns Hopkins University. Population Information Program; Columbia University. Center for Population and Family Health. Library/ Information Program; Princeton University. Office of Population Research. Population Index; University of North Carolina at Chapel Hill, Carolina Population Center. -- Bethesda, MD, National Library of Medicine, 1980-1985.
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Several previously published bibliographies on related topics were very useful. We appreciate having permission to use abstracts from the work of others. Material from the following works is copyrighted and should not be reproduced without prior permission:

A Bibliography of The Hmong (Miao) of Southeast Asia and The Hmong Refugees in the United States by Olney.

Cambodian Bibliography by Marston.

Hispanic Health and Mental Health Database by the Spanish Speaking Mental Health Research Center -- The Hispanic Health and Mental Health Database, funded in part by the National Institute of Mental Health, is reproduced with the permission of Dr. Amado M. Padilla, Principal Investigator, Spanish Speaking Mental Health Research Center, University of California at Los Angeles, and may not be reproduced without his prior permission.

Resettlement of Indochinese Refugees in the United States: A Selective and Annotated Bibliography by Ashmun -- These citations are reprinted with the permission of the Northern Illinois University Center for Southeast Asian Studies and may not be reproduced without specific permission from Northern Illinois University Center for Southeast Asian Studies.

Selected Bibliography of the Indochinese Mental Health Project by the International Institute of San Francisco.

Please consult the "User's Guide for the Bibliography" section for the complete citations for these bibliographies.

In addition, a number of bibliographies published by the United Nations and NIMH were consulted. Material from these sources is in the public domain and may be used or reproduced without prior permission:

Refugee Abstracts by Braham.

Mental Health Issues: Indochinese Refugees, An Annotated Bibliography by Silver and Chui.

Handbook on Asian American/Pacific Islander Mental Health by Morishima, Sue, Teng, Zane, and Cram.

International Bibliography of Refugee Literature by the United Nations High Commissioner for Refugees.

A Selected and Annotated Bibliography on Refugee Women by the Refugee Policy Group.

The "User's Guide for the Bibliography" section contains the complete citations for these bibliographies.

References were also suggested by many experts in the field, including TAC staff. We appreciate the additions to the bibliography made by these individuals, too numerous to name. Particularly helpful were the contributions of the staff of the Southeast Asian Refugee Studies Project of the Center for Urban and Regional Affairs, University of Minnesota, especially Douglas P. Olney. Their bibliographies were invaluable, as was being able to review their files and materials on refugees. The Center for Urban and Regional Affairs faculty's and staff's expertise in compiling bibliographies was most helpful in designing this bibliography. Most notable were the efforts of Pamela Anderson and Margaret R. Wolfe. Ms. Anderson provided considerable technical assistance in using the computer software for the citations, including writing her own programs to manipulate the large data base and producing printouts of several earlier drafts. Both her computer expertise and patience with changes and postponements in deadlines were much appreciated. Ms. Wolfe also provided assistance with the computer and spent many hours developing the indices. It is difficult to imagine the bibliography being completed without the assistance of Ms. Anderson and Ms. Wolfe.

Finally, I was very fortunate in having a conscientious and capable group of graduate research assistants working with me on this project. All the research assistants were public health students interested in refugees, mental health, or cross-cultural health issues. Marge Bache-Wiig, Anne List, Claudia Baier, Julie Hladky, and Gwen Short contributed to the quality of the bibliography and made a difficult and sometimes tedious task very pleasant. Ms. Bache-Wiig and Ms. Hladky became very adept at locating references in the library with very limited information about their source; Ms. List and Ms. Baier became our computer and data entry experts, and Ms. Short spent many hours abstracting articles. Although they developed these individual specialties, there was much cross-over in tasks and their collective, painstaking attention to detail was greatly appreciated.

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Introduction

Three common myths plague the field of refugee mental health and its parent field of refugee research:

Myth 1: Refugee movements are unique and nonrecurring events.

Myth 1 is the basis for its corollaries:

Myth 2: By their very nature refugee movements can not be planned nor preparations made to meet the mental health needs of refugees.

Myth 3: Past experiences with previous refugee movements are not useful in planning for the needs of current and future refugee groups.

Just considering the size of this bibliography and the number of different refugee groups described in it negates the myth that refugee movements are unique, nonrecurring events. A quick glance at the bibliography's content brings considerable questions to Myths 2 and 3 as well. The reader will find mental health professionals and other investigators working with diverse refugee groups and in differing settings reporting similar findings: there appears to be a commonality of experiences in being a refugee that leads to predictable behavioral changes across diverse cultural groups (see References 1B.014, 1B.037 and 1B.038, as well as Section 1E--Assimilation, Acculturation, and Adaptation). Because of this, refugees are at higher risk for mental health problems than other groups in the general population (see Section 2A--Typical or Common Mental Health Problems, Disorders, or Issues for Refugees). The professionals and investigators, who work with refugees, often not knowing the efforts of each other, frequently offer the same recommendations for providing for the mental health needs of refugees.

How is it that professionals working with refugees do not know of others' work in the field? Stein (Reference 1B.038) provides some answers to this question. Professionals interested in refugee mental health and, more generally, refugee research, are scattered across many different disciplines. Mental health workers not only must consult their own journals and professional literature, but also the fields of anthropology, history, law, medicine, political science, public health, and sociology, to name a few. When one considers the specializations of the various mental health professionals (e.g., psychiatry, clinical psychology, psychiatric social work, and psychiatric nursing) and the dispersal of information about refugee mental health across these specialties as well, it is understandable how others' work is missed.

This bibliography, spanning a number of relevant disciplines, is offered to alleviate some of the problems in finding material on refugee mental health. It contains primarily materials in the published, scientific literature. As such, some excellent unpublished materials, conference proceedings, popular press articles, pamphlets, and government and United Nations reports on the topic have not been included. A decision was made early in the development of the bibliography to exclude those sources for several reasons: 1) the limited availability of much of the unpublished literature makes its usefulness limited; 2) oftentimes the unpublished materials are rewritten and presented in the scientific literature; 3) articles and books in the scientific literature frequently have undergone peer reviews, offering some assurance of quality; and 4) the amount of material found in the published literature was sufficiently large for a volume.

References for this bibliography were obtained through several methods. Computerized searches of the relevant literature (see the next section, "User's Guide for the Bibliography," for a complete listing of the searches used) were undertaken in December 1985 to as far back as the search allowed. Other bibliographies were also consulted (see the listing in "User's Guide for the Bibliography"). References were also suggested by individuals working in mental health agencies both in the Twin Cities area and nationally. The materials in the collection of the Southeast Asian Refugee Studies Project of the Center for Urban and Regional Affairs of the University of Minnesota were consulted, as were the personal files of the University of Minnesota's Refugee Mental Health Technical Assistance Center faculty and staff. Some of the professionals whose work frequently appears in the literature were consulted for suggestions for references as well.

Despite these varied methods, some important references were not found in time to include in this edition. The Technical Assistance Center of the University of Minnesota has begun to compile a list of additional and new references to include in an update of this volume.

Many professionals will be encouraged by the size of this bibliography; it indicates that considerable information exists about the mental health of refugees. Furthermore, the inclusive nature of it allows the professional to sort through the references to determine what is relevant for his or her own purposes. However, some have commented that the sheer volume of this edition makes it less useful and have indicated a preference for an abridged listing. Fortunately, there are two general books recently published on refugee mental health that can be consulted. One, published by the National Institute of Mental Health (NIMH), was developed to provide technical assistance for planning and implementing appropriate mental health services for Southeast Asian refugees and is listed as Reference 2F.016 in this bibliography. The other, edited by Williams and Westermeyer (Reference 2F.026), considers refugee groups in addition to the Southeast Asians; provides an overview of the field of refugee research, migration theory, and acculturation; and has chapters about experiences with refugees from outside of the United States.

Obviously, those who rely on one or two sources to inform themselves about refugee mental health will be getting a limited view of a very complicated field. However, practical issues and real-life deadlines frequently do not allow for a thorough reading of many of the articles and books in this bibliography. Rather, it is hoped that the professional interested in a particular topic (like mental health promotion) will be able to refer to that section in the bibliography and be able to choose the most promising articles to review more thoroughly from the information in their abstracts.

In order to make the bibliography more useful to the reader, the references have been grouped into four major sections: 1) Understanding Refugees in Context; 2) Specific Mental Health Issues and Refugees; 3) Concerns of Selected

Subgroups of Refugees; and 4) Other Bibliographies on Refugees or Related Topics. The first three sections have been further subdivided into categories.

The first section includes important background material for the mental health professionals from diverse fields. Having an understanding about a refugee's cultural background is crucial for the mental health professional and references on this topic can be found in 1A--Cultural and Related Information about Different Refugee or Ethnic Groups. The reader will find articles, books, and chapters on cultural information, history, geography, law, and politics of several of the recent refugee groups in this decade. Many of these articles are summaries written especially for health or mental health professionals and include information about traditional health beliefs and values. Additional information about health can be found in Category 1D--Physical Health and Medical Care of Refugees. References on the cultural effects on personality and psychiatric studies conducted in Southeast Asia prior to the refugee exodus are included here. This listing, like the other categories in Section 1, should not be considered all-inclusive, but as providing a sampling of information about culture for the mental health professional.

Category 1B--Research on the Refugee Experience and Behavior includes references on research studies of refugees that have not been classified elsewhere. References on migration, refugee theory, refugee movements, secondary migration, characteristics of entrants vs refugees vs immigrants, employment of refugees, demographics, and public opinion and attitudes toward refugees are included here. The reader will also find studies on refugee groups like the Palestinians who have had a long history of displacement, but who typically do not migrate to countries like the United States. Research studies on mental health topics such as common psychiatric problems, assessment procedures for refugees, or treatment outcome studies are not classified in this category but in their appropriate categories (i.e., 2A, 2B, and 2D). Similarly, studies on assimilation, acculturation, and adaptation have their own category (1E).

The category 1C--Policy Issues contains relatively few articles that specifically address mental health policy. However, certain refugee policy issues have implications for mental health. Resettlement procedures (e.g., dispersal) have had an impact on the mental health of refugees. This section contains articles on dispersal, sponsorship, immigration policy, and the policies of the government, voluntary and private organizations with regards to refugees.

The content of references in Category 1D--Physical Health and Medical Care of Refugees is evident from its title. Topics included here are common health problems, health screening procedures, health services in refugee camps, fertility, health education, immunizations, Acquired Immune Deficiency Syndrome and Haitians, health and nutritional status of refugees, mortality, medical care for Soviet Jews, and folk explanations of illness. A problem receiving increasing attention is the Sudden Death Syndrome (SDS) among some Southeast Asian refugees. Those articles concerned with its physical manifestations are included here; articles postulating psychological causation or relationship for SDS are classified in Category 2A.

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The final category in the first section, 1E--Assimilation, Acculturation, and Adaptation, contains several references from studies in other countries and diverse refugee groups. General principles of assimilation, acculturation, and adaptation of refugees may be gleaned from these studies.

For many users, the substance of the bibliography will be found in the categories in Section 2--Specific Mental Health Issues and Refugees. Category 2A--Typical or Common Mental Health Problems, Disorders, or Issues for Refugees contains references with important background material on the epidemiology of mental illness among refugees, the association of immigration and mental disease, and common forms of mental illness associated with migration. Specific problems like bereavement, paranoid disorders, depression, somatization, suicide, alcoholism and substance abuse are included here. Some references on Post Traumatic Stress Disorder can be found in this section as well as in Category 3E on victims. As mentioned above, articles on the psychological aspects of Sudden Death Syndrome are listed here.

References that report on the use of psychological tests or procedures and diagnostic practices with refugees or culturally diverse groups are listed in 2B--Assessment and Diagnosis. Some references report on procedures specifically developed with refugees, although the number of these articles are relatively few. Therefore, a number of the references are from the more general cross-cultural literature. However, this listing of relevant cross-cultural articles is not exhaustive. Articles are included on psychiatric diagnosis, personality assessment, and cognitive abilities testing. Category 2C--Needs Assessment contains a much smaller listing of references as many reports of needs assessment of refugees have not been submitted to the published literature. Some of the techniques described in articles in Category 2B--Assessment and Diagnosis can be used for needs assessment.

The Treatment Category (2D) is fairly self-descriptive. Some articles on cross-cultural psychotherapy are included. Other topic areas covered are the use of traditional healers in treatment, bilingual/bicultural staff, and the use of interpreters in therapy.

Category 2E--Prevention, Promotion, and Outreach contains some references on programs typically outside the purview of mental health professionals. For example, there are references on methods to use in teaching English in order to reduce frustration and anxiety, the use of planned clusters in resettlement, cultural orientation programs, and indigenous support systems and mutual assistance associations.

Category 2F--Mental Health Service Delivery contains references concerned with broader systems and services issues. There are articles on the delivery of services; mental health services in Israel, a country of immigrants and refugees; mental health services to ethnic minorities; inpatient services; and community-based services. Two general books on refugee mental health are included here.

The category on Training Issues and Professional Development (2G) has several groups of references. One group includes references on training both mental health professionals and bilingual paraprofessionals to work with refugees. Another group of references discusses the integration of the professional refugee into our health care system. There are some interesting historical articles in this section on the influence of refugee professionals, particularly Anna Freud and other refugee psychoanalysts and their effect on American psychoanalysis.

Section 3--Concerns of Selected Subgroups of Refugees was included because of the interest in different subgroups of the refugee population. The recent refugee movements in the United States have included a much larger proportion than earlier movements of children and adolescents who have differing issues and needs compared to adults. Category 3A contains references about them. Some of the key issues in this category include unaccompanied minors and orphans, education of young refugees, pseudo-battering (cultural practices that mimic child abuse), and foster care. There are some references here that do not deal specifically with refugees, but some have been suggested as being relevant to refugee children (i.e., children's responses to disasters and cross-racial foster placement).

Categories 3B--Women and 3C--Elderly are fairly short, despite expressed interest in refugee women and the older refugee. Category 3D contains references describing issues facing refugee families in their country of resettlement, as well as traditional kinship and family structure in the refugee's country of origin.

Unfortunately, refugees have often been the victims of torture, terror, concentration camps, and/or rape. The special concerns of this group of refugees are contained in the references in Category 3E.

The last section, 4--Other Bibliographies on Refugees and Related Topics, deviates the most from the rule of only including published sources in this volume. A number of these bibliographies have not been published; however, it was decided to include this listing because of its utility. One of the references (4.004) is published and would be of particular use to those interested in victims and Post-Traumatic Stress Disorder. Reference 4.004 contains articles, chapters, and books on the survivors of Nazi concentration camps. Most of these references are not included in this bibliography, but have relevance to more recent refugee concentration camp survivors.

Specific information on how to use this bibliography and its indices is included in the next section.

User's Guide for the Bibliography

The references in this bibliography are categorized by content areas. Each reference has been assigned to one main section and a category[1] within its section. A reference is printed only once in the bibliography in its assigned section and category. The following is a listing of sections and categories for the bibliography:

1. Understanding Refugees in Context
    - A. Cultural and Related Information About Different Refugee or Ethnic Groups
    - B. Research on the Refugee Experience and Behavior
    - C. Policy Issues
    - D. Physical Health and Medical Care of Refugees
    - E. Assimilation, Acculturation, and Adaptation
2. Specific Mental Health Issues and Refugees
    - A. Typical or Common Mental Health Problems, Disorders, or Issues for Refugees
    - B. Assessment and Diagnosis
    - C. Needs Assessment
    - D. Treatment
    - E. Prevention, Promotion, and Outreach
    - F. Mental Health Service Delivery
    - G. Training Issues and Professional Development
3. Concerns of Selected Subgroups of Refugees
    - A. Children and Adolescents
    - B. Women
    - C. Elderly
    - D. Family and Kinship
    - E. Victims of Torture, Terror, Concentration Camps, or Rape
4. Other Bibliographies on Refugees or Related Topics

These sections and categories are described more fully in the introduction.

A number of references contain material relevant to more than one category. In fact, some references are very difficult to assign to only one category. Therefore, at the end of each category is a listing of references that also contain material relevant to that category. The reader is advised to refer to those references as well. Each reference has been assigned a unique alphanumeric symbol which reflects its section and category assignment and placement within the category. The first two characters indicate the reference's section and category assignment, which is followed by a period and then three digits indicating the reference's placement within the category. Thus, reference 1A.030 refers to the thirtieth reference in Category A, Cultural and Related Information About

Different Refugee or Ethnic Groups of Section 1, Understanding Refugees in Context. Similarly, Reference 3B.004 refers to the fourth reference in Category B, Women, of Section 3, Concerns of Selected Subgroups of Refugees.

References are listed alphabetically by author in each category following the style, as closely as possible, suggested in the third edition of the *Publication Manual* of the American Psychological Association. Each citation is followed by an abstract of the reference. Information about how the reference was found (its original source) and who wrote the abstract is included in parentheses immediately after the abstract using the format: (ORIGINAL SOURCE/AUTHOR OF ABSTRACT). The following abbreviations were used for the information presented within the parentheses:

MEDLINE:	Medline computer search (to December 1985)
POPLINE:	Popline computer search (to December 1985)
SOCIAL WORK ABSTRACTS:	Social Work Abstracts (to December 1985)
REFUGEE ABSTRACTS:	Braham, M. (Ed.). (1982-1985). *Refugee Abstracts* (volumes 1-4). Geneva, Switzerland: Refugee Documentation Center of the Office of the United Nations High Commissioner for Refugees.
NIMH:	Silver, B. J. & Chui, J. (1985). *Mental Health Issues: Indochinese Refugees. An Annotated Bibliography.* (DHHS Publication No. ADM 85-1404). Washington, DC: U.S. Government Printing Office.
HAAPIMH:	Morishima, J. K., Sue, S., Teng, L. N., Zane, N. W. S., & Cram, J. R. (1980). *Handbook On Asian American/ Pacific Islander Mental Health.* (DHHS Publication No. ADM 80-754). Washington, DC: U.S. Government Printing Office.
NIUCSEAS:	Ashmun, L. F. (Ed.). (1983). *Resettlement of Indochinese Refugees in the United States: A Selective and Annotated Bibliography. Occasional Papers No. 10.* Dekalb, IL: Center for Southeast Asian Studies, Northern Illinois University.

SABRW:	Refugee Policy Group. (1985). *A Selected and Annotated Bibliography on Refugee Women.* Geneva, Switzerland: Refugee Documentation Center of the Office of the United Nations High Commissioner for Refugees.
HB-SARS:	Olney, D. P. (1983). *A Bibliography of the Hmong (Miao) of Southeast Asia and the Hmong Refugees in the United States*, second edition. Minneapolis: Center for Urban and Regional Affairs, University of Minnesota.
CB-SARS:	Marston, J. (in press). *Cambodian Bibliography.* Minneapolis: Center for Urban and Regional Affairs, University of Minnesota.
SBIMHPIISF:	*Selected Bibliography of the Indochinese Mental Health Project* by the International Institute of San Francisco.
HHMHDB-UCLA:	*Hispanic Health and Mental Health Database.* Spanish Speaking Mental Health Research Center, University of California at Los Angeles.
IBRL:	*International Bibliography of Refugee Literature.* (1985). Geneva, Switzerland: International Refugee Resource Center of the Office of the United Nations High Commissioner for Refugees.
TAC:	Refugee Assistance Program: Mental Health--Technical Assistance Center, University of Minnesota

As an example of the meaning of the information presented within the parentheses, "(MEDLINE/AUTHOR)" indicates that the citation was found originally in the Medline computer search and the abstract was written by the author of the article. If only one source is listed within the parentheses, for example "(NIMH)" or "(TAC)", then both the citation and abstract came from that source. Please note that a specific citation could have been listed in several (or even all) the computer searches or other sources, but we have listed only the one we used. There were many cases of a citation appearing in several of our sources. A very few of our abstracts were obtained from promotional material supplied by the publisher of the reference. These are indicated by "(ORIGINAL SOURCE/ PUBLISHER)." Finally, in a few cases the notation "/TAC edited" will appear within the parentheses. This indicates an abstract that was slightly modified (usually to short it) by TAC staff. However, there may have been a few times when TAC staff made slight grammatical or other changes in an abstract and did not note this.

Only the abstracts with "(TAC)" or "(ORIGINAL SOURCE/TAC)" were written by TAC staff. The rest were written and most often copyrighted by the sources indicated within the parentheses and we are reproducing them with permission. As such, they should be treated as copyrighted material. Please see the Acknowledgements section for further information about copyrighted material.

Our system of indicating the sources for the abstracts was modified for Psychological Abstracts and Sociological Abstracts Inc. material at their requests. Abstracts taken from the Psychological Abstracts computer search are followed by the notation, "(c) APA". Abstracts taken from the Sociological Abstracts Inc. computer search are indicated by "(COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)".

Three indices are located at the end of the bibliography. All the indices use reference numbers instead of page numbers. This tells the reader how the references were categorized originally, thus giving some indication of the reference's primary focus. The first index is Refugee/Ethnic Group, allowing the reader to find all the articles about a particular group. For example, if the reader is interested in all the references about the Vietnamese, then he or she will find such a listing in this index. However, the reader should also be aware of the broader category, "Southeast Asian," and search that category as well. A number of references discussed issues common to all refugees and are classified as "General" in this index. They also may use specific groups (e.g., Vietnamese) for illustrations of the points made in the reference. The reader is advised to skim this index to familiarize himself or herself with the terms chosen for use in the index before searching for a particular group in order that all appropriate terms are selected. As another example, "Southeast Asian" is always used instead of "Indochinese."

The next index is the author index. It lists all the references in the bibliography by author for those particularly interested in finding the work of a certain individual. It also uses reference numbers instead of page numbers.

The last index is a subject index to allow readers to find more specific topics than does the category system. For example, if a reader would like to find all the articles about "depression," then this index can be used. Please be aware of the limits of this index since it is based solely on the abstracts of the references and so some important concepts, terms, or issues in the reference may be missed if they were not included in the abstract of the reference.

Errata

Reference 1B.023 is misplaced in the 1B category. It should be listed among category 2A--Typical or Common Mental Health Problems, Disorders, or Issues for Refugees

Reference 3D.010 is misplaced in the 3D category. It should be listed among category 3E--Victims of Torture, Terror, Concentration Camps, or Rape.

SECTION 1

UNDERSTANDING REFUGEES IN CONTEXT

1A. Cultural and Related Information ...

1A.001
Bliatout, B. T. (1980). The Hmong from Laos. In J. F. McDermott, Jr., W. T. Tseng, & T. W. Maretzki (Eds.), *People and Cultures of Hawaii; A Psychocultural Profile.* (pp. 217-224). Honolulu: The University of Hawaii Press.

Refugee/Ethnic Group: Hmong

The culture of the Hmong is described within a historical context-from life in Laos to the resettlement process in Hawaii. Problems in the resettlement process such as culture shock, communication difficulties, and family separation and dissension are discussed. The author suggests alternative methods such as using educational terms instead of "mental health" to avoid stigmatizing an individual client, to make counseling more accessible to the Hmong population. (NIUCSEAS/TAC)

1A.002
Chomsky, N. (Ed.). (1970). *At war with Asia: Essays on Indochina.* New York: Vintage Books.

Refugee/Ethnic Group: Hmong; Southeast-Asian

This book was not available to abstract. (HB-SARS)

1A.003
Cohon, J. D. (1983). Southeast Asian refugees and school health personnel. *Journal of School Health*, *53*, 151-158.

Refugee/Ethnic Group: Vietnamese; Cambodian; Lao; Southeast-Asian

Discusses methodological and demographic limitations of attempts to generalize how traditional Southeast Asian cultural beliefs may affect the attitudes of refugee children toward the health services and style of education in American schools. Brief overviews of the diverse cultural influences of Vietnam, Cambodia, and Laos, as well as some of the psychological consequences of cultural change observed with uprooted children, are described. The role of school health personnel as a cultural bridge performing 3 functions--direct services, indirect services, and research--is also discussed. ((c)APA)

1A.004
Dobbins, E., Lynch, B. A., Fischer, D. K., & Santopietro, M. S. C. (1981). A beginner's guide to Vietnamese culture. *RN*, *44*, 44-45.

Refugee/Ethnic Group: Vietnamese

Since so many refugees from this country are coming from Vietnam, a guide to that nation's culture is particularly useful. It also provides a good starting point for understanding patients from other Indochinese nations, as all cultures from that region have much in common. This overview touches only on the major elements of Vietnamese culture likely to affect your work with refugees. Use it to assess your patients' particular beliefs, always allowing for regional variations and the influence of American values. (NIUCSEAS)

1A.005
Ea, M. T. (1981). Kampuchea: A country adrift. *Population and Development Review*, *7*, 209-228.

Refugee/Ethnic Group: Cambodian

The political history of Kampuchea, formerly Cambodia, in the decade of the 1970s is characterized by successive waves of civil war, revolution, and invasion. The demographic history of this same period is characterized by excess mortality from war, from massacres and executions, and from famine; by forced migrations and flight of refugees; and by greatly reduced birth rates. At the start of the 1980s the cultural identity of the Kampuchean peoples is threatened with virtual extinction as the population is increasingly absorbed into the Indochinese federation. Focusing on the period since the defeat of the Lon Nol government by Khmer Rouge in 1975, and the formation, in January 1976, of Democratic Kampuchea, this paper pieces together available data on the impact of the years of upheaval on demographic trends in the country. (POPLINE/AUTHOR)

1A.007
Erinosho, O. A., & Ayonrinde, A. (1978). A comparative study of opinion and knowledge about mental illness in different societies. *Psychiatry*, *41*, 403-410.

Refugee/Ethnic Group: Nigerian; Yoruba

An extensive survey of two communities in Western Nigeria, one urban and the other rural, was conducted to find out some characteristics of opinion and knowledge about mental illness among the Yoruba. A questionnaire containing descriptions of four different types of mental illness (simple schizophrenia, paranoid schizophrenia, anxiety neurosis/depression, and alcoholism), was administered to 771 respondents, randomly selected. The description of paranoid schizophrenia was more readily recognized as mental illness than the others. Respondents tended to typify persons who fit the other three descriptions in such terms as "shy," "hot-tempered," "queer," "flirt," and "drunkard." Compared with

Asian, Australian, and North American studies, lesser proportions of Nigerian respondents viewed the descriptions as symptomatic of psychiatric disorder. The finding that most respondents are still unaware of the range of symptoms and their significance is particularly striking because the catchment area for this study has had a long exposure to modern psychiatric delivery systems. It is suggested that the heightening of awareness of psychiatric symptoms through nationwide mental health education is essential for the full utilization of mental health services. (AUTHOR)

1A.008
Goldfarb, M. (1982). *Fighters, refugees, immigrants: A story of the Hmong.* Minneapolis: Carolrhoda Books.

Refugee/Ethnic Group: Hmong

Pictorial representation of life in the refugee camp of Ban Vinai. Author describes his experience as a volunteer physician. (POPLINE/TAC)

1A.009
Haines, D. W., Rutherford, D., & Thomas, P. (1981). The case for exploratory fieldwork: Understanding the adjustment of Vietnamese refugees in the Washington area. *Anthropological Quarterly, 54,* 94-102.

Refugee/Ethnic Group: Vietnamese; Southeast-Asian

The anthropological techniques of exploratory fieldwork can make a contribution to the understanding of ethnic groups in metropolitan areas, to interdisciplinary fields, e.g., refugee studies, & to the researcher's professional development. These contributions are described with respect to a series of field efforts with Vietnamese refugees in the Washington, DC, metropolitan area. The Maryland & Virginia suburbs have consistently hosted one of the nation's largest Indochinese refugee clusters. Results of the field research help to clarify the social context of the Vietnamese refugees' adjustment process, the deceptiveness in this case of the traditional analytic categories of "economics" or "the family," & the extended, spatial, & temporal dimensions of adjustment. What appears most clearly is the continuing importance of kinship as the mediator of adjustment. While the Washington milieu affects the refugees themselves, it has even more important effects on the conduct of research. Specifically, it enhances the applied, policy-oriented characteristics of research, as in an emphasis on the dynamics of secondary migration. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1A. Cultural and Related Information ...

1A.010

Indochinese refugees' cultural traditions often their only like to past. (1980). *Michigan Medicine, 79*, 474-475.

Refugee/Ethnic Group: Southeast-Asian; Vietnamese

Describes the Vietnamese values and beliefs in regard to religion, education, family and personal characteristics in order to help service providers to affirm the refugees' cultural heritage. (MEDLINE/TAC)

1A.011

Kemp, C. (1985). Cambodian refugee health care beliefs and practices. *Journal of Community Health Nursing, 2*, 41-52.

Refugee/Ethnic Group: Cambodian, Lao

The opinion that Cambodians and Lao are the same as the Vietnamese is a common mistake held by Western health care providers. This article discusses the differences in refugee experiences, present status, general health care beliefs and medical practices. Reproductive issues are also described and the author concludes with a discussion on mental health problems specific to refugees. (MEDLINE/TAC)

1A.012

Khoa, L. X., Pham, D. T., Doeung, H. H., Chaw, K., Pham, P. G., Bounthinh, T., Van Deusen, J. M., & Miller, B. (1981). Southeast Asian social and cultural customs: Similarities and differences, Part 2. *Journal of Refugee Resettlement, 1*, 27-47.

Refugee/Ethnic Group: Southeast-Asian

A comparative chart is presented, providing revealing differences in beliefs, practices, and experiences that exist within the group labeled Southeast Asian (Vietnamese, Cambodian, Hmong, Lao). Topics covered include: the individual, the family and group, neighborhoods, city life, the nation, world views, and the universe. (NIUCSEAS/TAC)

1A.013

Knoll, T. (Ed.). (1982). *Becoming Americans: Asian sojourners, immigrants, and refugees in the Western United States.* Portland, OR: Coast to Coast Books.

Refugee/Ethnic Group: Asian; Cambodian

Discusses the different Asian immigrant populations, their backgrounds, and the roles they've played on the West Coast of the U.S. The chapter on Cambodians is short and not especially revealing, but the book is helpful in that it puts Cambodian immigration into a framework of the more general patterns of Asian immigration to the U.S. (CB-SARS)

1A.014
Liu, W. T., & Murata, A. K. (1977). The Vietnamese in America, Part Two: Perilous flights, uncertain future. *Bridge: An Asian American Perspective*, *5*, 42-50.

Refugee/Ethnic Group: Vietnamese

The hardships encountered by Vietnamese refugees in their journeys to the U.S. are described in this article. In addition, the extent to which their backgrounds, age, education, skills and so forth will affect their adjustment to life in this country is assessed. The individuals interviewed were located at Camp Pendleton, California in 1975. (NIUCSEAS)

1A.015
Liu, W. T., & Murata, A. K. (1978). The Vietnamese in America, Part Three: Life in the refugee camps. *Bridge: An Asian American Perspective*, *6*, 36-46.

Refugee/Ethnic Group: Vietnamese; Jewish; Cuban; Ugandan

This article briefly summarizes the successful resettlement of three refugee populations: the European refugees in Lake Oswego, New York; the Cuban refugees in Miami, Florida; and, the Ugandan Asians in Great Britain. A comprehensive description of Camp Pendleton, California, the first processing center opened to accept Vietnamese refugees, is provided. The set-up and daily activities of the camp are discussed, as well as three separate evaluations of the camp - one from the Marines, the second from Congressman Mineta, and the third from the refugees themselves. (NIUCSEAS/TAC)

1A.016
Marx, R. (1981). The Iu Mien. *Migration Today*, *9*, 20-26.

Refugee/Ethnic Group: Southeast-Asian; Iu-Mien

Describes the situation of the Iu Mien (or Yao) Southeast Asian refugees who have settled in the San Francisco Bay area. Discusses economic and cultural factors related to their adjustment, and stresses the need for social service workers to become more familiar with Southeast Asian culture. (NIUCSEAS)

1A.017
Mercer, E. (1981). A "professional" approach to helping immigrants and refugees. *Canadian Nurse, 77*, 20.

Refugee/Ethnic Group: General

The author briefly explores potential cultural difficulties encountered during interviews with refugees and immigrants. She offers four suggestions that may help to promote more effective communication. (MEDLINE/TAC)

1A.018
Nguyen, D. L., & Kehmeier, D. F. (1979). The Vietnamese in Hawaii. In J. F. McDermott, W-S. Tseng, & T. W. Maretzki (Eds.), *People and cultures of Hawaii.* (pp. 202-217). Honolulu: University Press of Hawaii.

Refugee/Ethnic Group: Vietnamese

Article discusses Vietnamese traditions, the evacuation process, and the adjustment process. Emphasis is on the cultural forces which dictate the Vietnamese mode of living, pattern of thought and behavior, and adjustment in the new environment. These forces are Buddhism, Confucianism, Taoism, and native geographic and historical conditions. Authors also depict a brief psychological profile of each group of refugees: the elderly, nuclear family units, men without families, female-headed families, and unaccompanied children. (NIMH)

1A.019
Okura, K. P. (1981). Refugees in America suffer from loss of community. *Michigan Medicine, 80*, 18.

Refugee/Ethnic Group: Southeast-Asian

More Southeast Asian refugees have resettled in the United States than in any other country. Cultural differences have created much stress for the refugee population. Mental health care has lacked sensitivity to cultural values and language differences, primarily because of the lack of properly trained mental health professionals. Cultural values need to be a central focus when planning mental health programs for refugees. (MEDLINE/AUTHOR)

1A.020
Olness, K. (1979). Indo-Chinese refugees: Cultural aspects in working with Lao refugees. *Minnesota Medicine*, *62*, 871-874.

Refugee/Ethnic Group: Southeast-Asian

A physician comments on culture and cultural norms in Laos and their impact on medical treatment. The specific areas of culture discussed include: climate and calendar, the Baci, taboos and pregnant women, marriage and death rites, the harvest festival, fishing, names, code of behavior, taboos, Lao food and medicine. (NIUCSEAS/TAC)

1A.021
Olness, K. (1981). A health outreach to a refugee camp: Perspectives for would-be volunteers. *Pediatrics*, *67*, 523-529.

Refugee/Ethnic Group: Hmong

This article describes the development of the Minnesota International Health Volunteers organization and its role in a Lao refugee camp in north-east Thailand. The camp medical program is described including the cooperative efforts of a variety of government and foreign volunteer agencies. The difficulties of medical care in a refugee camp are portrayed. The advantages of an American family participating in the camp's activities are described. The author concludes with an outline of volunteer preparation for international health work. (HB-SARS/TAC)

1A.022
Pearson, R. (1982). Understanding the Vietnamese in Britain, Part II: Marriage, death and religion. *Health Visitor*, *55*, 477-483.

Refugee/Ethnic Group: Vietnamese

The Vietnamese recognize three important events in the life of the individual - birth, marriage, and death. Courtship and marriage have traditionally been arranged between families, although in modern times, the parents' role has become more one of advising and counseling. Funerals involve much ritual and are often elaborate. The deceased is mourned, but the emphasis at the funeral is on the family and its continuance. Religion in Eastern cultures centers around the conduct of one's daily life rather than around a personal God. Confucianism, Buddhism, Christianity, Taoism, superstition, and ancestor worship all play a part in the religious practices of Vietnamese. (MEDLINE/TAC)

1A.023

Rieu, L. T. (Ed.). (1978). *Modern and traditional medical practices of Vietnam: Vietnamese concepts of illness and treatment.* San Francisco: Indochinese Mental Health Project, International Institute of San Francisco.

Refugee/Ethnic Group: Vietnamese

This paper discusses superstitious, folk, traditional, and modern medical practices of Vietnam. Concepts of illness, somatization, behavior labeling, diagnostic attempts, and attitudes toward treatment among Vietnamese are also reviewed. (NIUCSEAS)

1A.024

Rocereto, L. (1981). Selected health beliefs of Vietnamese refugees. *Journal of School Health*, *51*, 63-64.

Refugee/Ethnic Group: Vietnamese

This article briefly covers some important points about Vietnamese beliefs, practices and attitudes that may affect health care. Communication styles, childbearing customs, religious and spiritual beliefs, traditional medical practices and others are mentioned as key considerations for health assessment and planning. (MEDLINE/TAC)

1A.025

Santopietro, M. C. S. (1981). Indochina moves to main street: How to get through to a refugee patient. *RN*, *44*, 43-44,46-48.

Refugee/Ethnic Group: Southeast-Asian

This article was written for nurses who work with Southeast Asian refugee patients. Along with general cultural information about the Southeast Asians, the author discusses several issues concerning working with interpreters. (MEDLINE/TAC)

1A.026

Santopietro, M. C. S., & Lynch, B. A. (1980). Indochina moves to main street: What's behind the 'inscrutable' mask? *RN*, *43*, 55-62.

Refugee/Ethnic Group: Southeast-Asian

The authors describe some of the pressures faced by Southeast-Asian refugees, including the trauma of flight, shattered families, difficulties of assimilation, and the toll of stress. A variety of nursing implications are discussed relating to the physical and mental health care of Southeast-Asian refugees. A list of age-related mental health problems is provided, as well as a variety of assessment techniques. Case studies are used to illustrate the cultural impact on health care. (MEDLINE/TAC)

1A.027
Slote, W. H. (1972). Psychodynamic structures in Vietnamese personality. In W. P. Lebra (Ed.), *Transcultural research in mental health.* (pp. 114-133). Honolulu: University of Hawaii Press.

Refugee/Ethnic Group: Vietnamese

Research findings on the influence of Vietnamese culture on the ego structure and identity patterns; the effect of traditionalism on motivation and behavior; stylization of personality and role adoption; institutionalization of affect, perception, attitude and cognition; and intrafamilial relations and child-rearing practices are presented. The widespread compliance with culturally approved standards by the Vietnamese is contrasted with the more individualized, self-determined ego structure of Western cultures. The overall effect of culture and upbringing on an individual's identity is discussed within the context of universalism. (SBIMHPIISF/TAC) •

1A.028
Social/cultural customs: Similarities and differences between Vietnamese-Cambodians-Hmong. (1980). *Indochinese Mental Health Project.* Pennsylvania: Bureau of Research and Training, Pennsylvania Office of Mental Health.

Refugee/Ethnic Group: Vietnamese; Cambodian; Hmong

Comparative chart to depict the social/cultural similarities and differences among Vietnamese, Cambodians and Hmong. The three groups are compared in terms of the following aspects: 1) family-marriage, childbirth and children, death/mourning; 2) society; and 3) religion. The appendix provides additional information concerning death and mourning in Cambodia. (NIMH)

1A.029
Tepper, E. L. (Ed.). (1980). *Southeast Asian exodus: From tradition to resettlement: Understanding refugees from Laos, Kampuchea, and Vietnam in Canada.* Ottawa: The Canadian Asian Studies Association.

Refugee/Ethnic Group: Southeast-Asian

This book was written detailing the Canadian experience in resettling Southeast Asian refugees. It provides background information on the peoples and cultures of Vietnam, Cambodia, and Laos, including the ethnic Chinese of Southeast Asia. The second section details geography, politics, and history of Southeast Asia. It includes a chapter describing why the refugees cannot stay in Southeast Asia and the situation in Thailand. The third section describes the resettlement issues, including chapters on Canadian refugee policy, cultural factors affecting adjustment, community and inter-ethnic relations of the refugees in Canada, economic adaptation of the refugees, and psychiatric problems of immigrants and refugees. (TAC)

1A.030
Thao, X. (1984). Southeast Asian refugees of Rhode Island: The Hmong perception of illness. *Rhode Island Medical Journal*, *67*, 323-330.

Refugee/Ethnic Group: Southeast-Asian; Hmong

The author describes Hmong beliefs about the cause of illness and its treatment. The information is based on interviews which were conducted with two Hmong male shamans and two female herbalists. The article includes a practice for determining if an individual is suffering from stress. The necessary training and role of shamans and herbal healers are outlined. (MEDLINE/TAC)

1A.031
Thomasma, E. R., & Lee, L. (1980). *Cultural backgrounds of the Indochinese people.* Knoxville: University of Tennessee Mental Health Center.

Refugee/Ethnic Group: Cambodian; Hmong; Lao; Vietnamese

Overview of Cambodian, Hmong, Laotian, and Vietnamese cultures. Paper points out the diversity among the Indochinese people and contrasts their characteristics with American traits. Discussion covers each ethnic group's historical background, religion, family, social structure, economy, and character traits. (NIMH)

1A.032
Timberlake, E. M., & Cook, K. O. (1984). Social work and the Vietnamese refugee. *Social Work*, *29*, 108-113.

Refugee/Ethnic Group: Vietnamese

Notes that the concept of "social work" does not exist in Vietnamese culture. Consequently, an understanding of Vietnamese refugees' cultural background, specific reactions to the traumas of flight and uprooting, and particular patterns of coping with the resettlement process is essential for social workers. Such an understanding will enable them to provide sensitive and effective work to this group. ((c)APA)

1A.033

Torjesen, H., Olness, K., & Torjesen, E. (1981). *The gift of the refugees: Notes of a volunteer family at a refugee camp.* Eden Prairie, MN: The Garden.

Refugee/Ethnic Group: Hmong; Lao

This book is a personal accounting of an American family with four children who volunteered at the Lao refugee camp at Nongkhai. The authors are the husband, wife, and oldest teenage son in the family. They worked as health volunteers in the camp and describe the impact of the residents of the camp on an American family. (HB-SARS/TAC)

1A.035

Van Deusen, J. M., Coleman, C. M., Khoa, L. X., Phan, D., Doeung, H. H., Chaw, K., Nguyen, L. T., Pham, P. G., & Bounthinh, T. (1980). Southeast Asian social and cultural customs: Similarities and differences, Part 1. *Journal of Refugee Resettlement, 1*, 20-39.

Refugee/Ethnic Group: Southeast-Asian
Comparative descriptions of social and cultural customs differentiating Southeast Asians. Description centers on the major features of family, social, and religious life among Vietnamese, Cambodian, Hmong and Laotian. A columnar format is used to identify parallels and contrasts between cultures. Readers are cautioned to be aware of individual differences generated by urbanization, social class status, and migration. Only through direct communication can one attain knowledge of the recent experience and lifestyles of individual refugees. (NIMH)

1A.034

Van Esterik, P. (1980). Cultural factors affecting the adjustment of Southeast Asian refugees. In E. L. Tepper (Ed.), *Southeast Asian exodus: From tradition to resettlement: Understanding refugees from Laos, Kampuchea, and Vietnam in Canada.* (pp. 150-171). Ottawa, Canada: The Canadian Asian Studies Association.

Refugee/Ethnic Group: Southeast-Asian

This chapter is part of a book describing the Canadian experience with the resettlement of Southeast Asian refugees. It covers various cultural factors such as status and hierarchy, age differences, sex roles, communication, and interpersonal relations. It also includes sections on health and nutrition and sponsorship. (TAC)

1A.036
Vang, T. F. (1979). The Hmong of Laos. In J. K. Whitmore (Ed.), *An introduction to Indochinese history, culture, language and life -- For persons involved with the Indochinese refugee education and resettlement project in the State of Michigan.* (pp. 93-102). Ann Arbor, MI: Center for South and Southeast Asian Studies, The University of Michigan.

Refugee/Ethnic Group: Hmong; Southeast-Asian

This chapter addresses the questions of who are the Hmong and what is it about their social organization and culture that makes them special. Comparisons are made between the Hmong and other Asians. In addition, the importance of family and clan are discussed. An English translation of a Lao-Hmong oral poem about being a refugee in the U.S. is included. (TAC)

1A.037
Westermeyer, J. (1971). Traditional and constitutional law: A study of change in Laos. *Asian Survey, 11*, 562-569.

Refugee/Ethnic Group: Lao

This article discusses the legal system in Laos. There are two distinct systems of law within Laos: the first, a traditional unwritten law operating at the village level, and the second, a written central government law that deals with problems not readily managed by traditional methods. The central government law works primarily in cases involving foreigners, in larger towns, and with such difficult issues as homicide and recidivism. The two systems work together to complement each other. This is an interesting discussion in light of the recent influx into this country of a large number of Southeast Asian refugees. (TAC)

1A.038
Westermeyer, J. (1971). Use of alcohol and opium by the Meo of Laos. *American Journal of Psychiatry, 127*, 1019-1023.

Refugee/Ethnic Group: Hmong

Understanding the use of addictive and other psychoactive drugs should be attempted in a variety of frameworks. In this study of alcohol and opium use among the Meo of Laos the author demonstrates that alcohol is employed within rigid social constraints and that alcoholism as such does not occur. Opium, a cash crop, is found in every home; many Meo smoke it, and a few become addicted to it. Studies such as this, using rigorous field methods, demonstrate the importance of the society-individual-drug triad. (AUTHOR)

1A.039
Westermeyer, J. (1972). A comparison of amok and other homicide in Laos. *American Journal of Psychiatry*, *129*, 703-709.

Refugee/Ethnic Group: Lao

Past studies of amok have focused on the psychopathology of incarcerated survivors; this study, which compares amok with other forms of homicide in Laos, emphasizes social factors as well. Results indicate that objective criteria can be developed for amok and that certain social variables concerning the homicidal person also distinguish between amok and other homicide. However, psychological characteristics prior to amok did not vary significantly for the two groups. (AUTHOR)

1A.040
Westermeyer, J. (1973). Assassination and conflict resolution in Laos. *American Anthropologist*, *75*, 123-131.

Refugee/Ethnic Group: Lao

Ten cases of political homicide in Laos were intensively studied, with particular attention to the assassin, the victim, the homicidal event, the provocation, and the social context. Each assassination provided a resolution for a social dilemma which had proven refractory to other means of social problem solving. Certain demographic characteristics and psycho-social correlates of political homicide in Laos resemble those of other cultures. (AUTHOR)

1A.041
Westermeyer, J. (1973). Assassination in Laos: Its psychosocial dimensions. *Archives of General Psychiatry*, *28*, 740-743.

Refugee/Ethnic Group: Lao

Ten cases of assassination in Laos were extensively researched using standard anthropological field techniques. These cases could be readily classified into three groups: criminal recidivism, dyssocial behavior (witchcraft), and abuse of power by nonelected officials. In addition to the differences among the three categories, there were also certain functional similarities among them. Behavior of the victims in all three groups had been deviant in regard to the community's norms, and it was deviant in such a way that it threatened community well-being in a major way. Assassination also served as a negative sanction to reinforce deference and amiability in interpersonal relations. In addition, it provided a problem-solving function when other means were not available for social problem resolution. Assassination in Laos was compared to political homicide in the United States. In many respects, the former resembled the classic vigilantism of the American frontier, wherein extralegal execution was infrequently required for community survival. Presidential assassination appeared to have evolved from "neovigilantism," a form of homicide with personal, ethnic, religious, and political overtones. (AUTHOR)

1A.042
Westermeyer, J. (1973). Grenade-amok in Laos: A psychosocial perspective. *The International Journal of Social Psychiatry, 19*, 251-260.

Refugee/Ethnic Group: Lao

Most studies of amok have concentrated on surviving individuals brought to court or hospital. Thus, a biased sampling of such individuals has resulted. In this study anthropologic field techniques were employed to obtain extensive data on grenade-amok in Laos, including cases in which the individual died as a result of his violent behavior. Data on premorbid state, precipitating events, and postmorbid psychopathology were collected for eighteen cases. In addition, demographic variables of the amok persons were obtained, and the social context of the amok behavior was investigated. Hypotheses presented in the paper take into account both the psychological and the sociologic dimensions of this problematic behavior. (AUTHOR)

1A.043
Westermeyer, J. (1973). On the epidemicity of amok violence. *Archives of General Psychiatry, 28*, 873-876.

Refugee/Ethnic Group: Lao

Traditionally, amok has been viewed as a bizarre culture-bound form of psychopathology. More recently, psychosocial aspects of this form of violence have been studied. This paper questions the solely endemic nature of amok and suggests that it has certain epidemic characteristics. Data to support this argument come from my work in Laos, and from reports originating in Thailand, the Philippines, Malaysia, and Indonesia. Three specific variables are examined: change in incidence of amok over time, spread of amok from one ethnic group or nation to another, and the use of a culturally prescribed weapon. Change in incidence of amok over time is related to certain historical correlates (especially politicoeconomic and cultural factors). Traditional hypotheses for amok violence are critiqued. A new psychosocial perspective is offered as a more inclusive and economic explanation for amok. (AUTHOR)

1A.044
Westermeyer, J. (1974). Opium dens: A social resource for addicts in Laos. *Archives of General Psychiatry, 31*, 237-240.

Refugee/Ethnic Group: Southeast-Asian; Lao

The social functions of opium dens were studied by two methods. (1) Repeated visits were made to three opium dens. Data were collected on the physical structure of the den, the owner-proprietor, the customer-participants, the activities, and conversations in the dens. (2) Thirty-five addicts were selected to comprise a representative sample and were interviewed regarding their present locus of opium usage; demographic data were obtained from these addicts. The article reports on several psychosocial functions that dens serve for certain opium users. The dens seem to serve urban society by providing a milieu within which certain people can meet needs that were served formerly in village society, but which are neglected in urban settings. (AUTHOR)

1A.045
Westermeyer, J. (1974). Opium smoking in Laos: A survey of 40 addicts. *American Journal of Psychiatry, 131*, 165-170.

Refugee/Ethnic Group: Southeast-Asian; Lao

An intensive survey of 40 opium addicts in Laos showed that opium smoking, like narcotic usage in general, can be powerfully addiciting. As is true of alcoholism in the U.S., the families of the addicts appeared to have inordinately high rates of addiction. The sample showed an unusually high proportion of women addicts and addicts from rural areas, but a low rate of criminality. In addition, addiction in Laos was not regularly associated with the severe social incapacity reported among narcotic addicts elsewhere. Unlike narcotic addiction in the U.S. and Korea, opium addiction in Laos may be an endemic rather than epidemic phenomenon. (AUTHOR)

1A. Cultural and Related Information ...

1A.046
Westermeyer, J. (1977). A heroin "epidemic" in Asia. *American Journal of Drug and Alcohol Abuse*, *4*, 1-11.

Refugee/Ethnic Group: Lao

Heroin "epidemics" have been reported in North America but not in Asia. Following passage of an anti-opium law in Laos, heroin use suddenly began in one area during 1972. Initally heroin use pervailed among indigenous Asian addicts, mostly older addicts who gradually switched from opium to heroin. In addition there evolved a new group of indigenous addicts: young, single, unemployed males in urban areas whose first narcotic drug was heroin. After the appearance of heroin in Laos, increasing numbers of younger Americans and Europeans were soon attracted to heroin use in Laos. (AUTHOR)

1A.047
Westermeyer, J. (1977). Narcotic addiction in two Asian cultures: A comparison and analysis. *Drug and Alcohol Dependence*, *2*, 273-285.

Refugee/Ethnic Group: Hmong; Lao

Our current knowledge regarding the effects of open access to narcotic drugs is limited. This study was undertaken to clarify issues regarding availability of these drugs. Two ethnic groups in Laos were compared: the Hmong (or Meo), a tribal group with access to opium in their homes; and the Lao, a peasant people with more limited access, usually in opium dens. Of 15 demographic and clinical variables studied, 10 showed significant differences between the two cultures. Eight of these 10 could be readily accounted for by differences in drug availability. Only two differences could be ascribed to socio-ecologic factors not related to drug availability. Similarities between the two groups appeared due to (1) pharmacologic effects of narcotic addiction and (2) low social opprobrium toward addiction in both cultures. In this study, open availability of narcotic drugs appeared to favor the following: a greater proportion of female addicts; younger age of opiate usage and addiction; use of the more intoxicating route of administration; earlier onset of problems related to addiction; and shorter duration of addiction before seeking treatment. (AUTHOR)

1A.048
Westermeyer, J. (1978). Ecological sensitivity and resistance of cultures in Asia. *Behavior Science Research*, *13*, 109-123.

Refugee/Ethnic Group: Asian

Ecological influences on culture have been demonstrated by several investigators. Many such studies have been done in Asia where two ecological niches extend over vast areas. One of these is the highland or mountainous territory 500 meters above sea level; the other consists of plains and plateaus under 500 meters. The HRAF files were used to compare cultures in the highlands with those in the lowlands. The files indicate that certain items may be ecology sensitive (that is, more apt to change with ecologic shift). These include agricultural methods, sociopolitical organization and preferred marriage forms. Other items may be ecology resistant (that is, less apt to change with ecologic shift). These include descent and house types. (AUTHOR)

1A.049
Westermeyer, J. (1978). Indigenous and expatriate addicts in Laos: A comparison. *Culture, Medicine and Psychiatry, 2*, 139-150.

Refugee/Ethnic Group: Lao

Opium addiction has been reported among virtually all large ethnic groups in Asia. Conspicuous by its absence has been any mention of addiction among the Lao, a people surrounded by poppy-growing tribal groups. A sample of Lao patient-addicts are here compared to expatriate Asian addicts in Laos. Lao and expatriate addicts show marked similiarity in their sociodemographic profiles and patterns of narcotic use. Some differences in their recent use of narcotic drugs appear related to the greater cash income of the expatriate Asians and their greater access to heroin. No specifically 'cultural' factors for explaining ethnic differences in addiction have yet been identified. (AUTHOR)

1A.050
Westermeyer, J. (1978). Social events and narcotic addiction: The influence of war and law on opium use in Laos. *Addictive Behaviors, 3*, 57-61.

Refugee/Ethnic Group: Southeast-Asian; Lao

War in Laos caused removal of opium farmers from their mountain poppy growing areas and contributed to difficulties in transport of opium from nearby areas. This has led to an increased cost and low availability of opium, which in turn has caused addicts (1) to reduce their narcotic dosage, and (2) to reduce their smoking of opium in favor of the less satisfying but more economic oral route of administration. Increased cost, low availability of opium, together with unemployment from refugee movements produced economic pressure on families with addicted members and resulted in widespread theft. This in turn led to anti-opium laws, which had the effect of favoring heroin addiction. Heroin addiction futher exacerbated the addict's problems since heroin production costs considerably more than the production of smoking opium. (MEDLINE/AUTHOR)

1A.051
Westermeyer, J. (1979). Folk concepts of mental disorder among the Lao: Continuities with similar concepts in other cultures and in psychiatry. *Culture, Medicine and Psychiatry, 3*, 301-317.

Refugee/Ethnic Group: Lao

Folk concepts for mental disorder were studied among rural Lao people. While predominantly inferring etiology (e.g. spirit-caused disorder), certain terms also emphasized particular descriptive psychopathology or behavioral abnormality. Preventive strategies were stressed for insanity due to "excessive worry" or "broken taboo". These broad folk categories of disorder bore considerable similarity to some psychiatric and neurologic categories within medicine. These include: psychosis, mania, neurosis, organic brain syndrome, mental retardation, cerebral palsy, epilepsy, and childhood autism. Lao folk terms for mental disorder also closely resembled those of other Southeast Asian cultures, although illiterate tribal peoples appeared to have fewer terms than literate peasant peoples. Folk terms from more distant regions had broad similarity to those of southeast Asia, but lacked the specificity found within the region. (AUTHOR)

1A.052
Westermeyer, J. (1979). Mortality and psychosis in a peasant society. *The Jounal of Nervous and Mental Disease, 166*, 769-774.

Refugee/Ethnic Group: Lao

A survey was conducted of psychotic persons in a peasant society where psychiatric services were not available. Their age distribution and duration of psychosis indicated that they had a reduced longevity as compared to the general population. Intensive study of six fatal and near fatal cases suggested that violence and infection accounted for their early demise. Those with organic psychosis appeared to have a greater mortality than those with functional psychosis. As our social policies toward the mentally ill change, these findings may have applicability in our own society. (TAC/AUTHOR)

1A.053
Westermeyer, J. (1980). Influence of mental illness on marriage, reproduction, and parenting in a society without psychiatric services. *The Journal of Nervous and Mental Disease, 168*, 614-620.

Refugee/Ethnic Group: Lao

This survey was undertaken in a peasant society without modern psychiatric services in order to assess marriage, reproduction, and parenting functions among

35 mentally ill persons. Among the mentally ill, single persons had earlier onset of mental illness as compared to those who had ever been married. Those who had married and produced children had a high rate of divorce from their spouses and separation from their children following onset of mental illness. Among 12 parents whose onset of mental illness began when their children were still young, five were not living with their children and the other seven exercised little or no parental supervision. In two families, the psychotic parent had beaten her children severely. One infant died of neglect when a psychotic mother refused to surrender child care to others. Mentally ill subjects 18 years or older were less apt to be married than opium addicts in the same population. Infant mortality was greater among the children of mentally ill than in the general population. (AUTHOR)

1A.054
Westermeyer, J. (1980). Psychosis in a peasant society: Social outcomes. *American Journal of Psychiatry, 137*, 1390-1394.

Refugee/Ethnic Group: Lao

Several clinicians have theorized that somatic and residential treatments have an untoward effect on the eventual outcome of major mental illness. To test this hypothesis, the author studied social coping behavior of mentally ill people in Laos, a predominantly peasant society with no psychiatrists or psychiatric hospitals. The Lao folk term baa ("crazy" or insane) was used in determining cases. Social factors studied included legal problems, family contact, sociability, friendship, communal activities, sexuality, and work. Results indicated that levels of social function in this sample were quite limited. The author concludes that social disability associated with chronic psychosis cannot be ascribed totally to diagnostic labeling or institutionalization. (AUTHOR)

1A.055
Westermeyer, J. (1980). Two Neo-Buddhist cults in Asia: The influence of the founder and the social context on religious movements. *Journal of Psychological Anthropology, 3*, 143-152.

Refugee/Ethnic Group: Asian; Thai; Lao

This paper examines the psychological characteristics of two Neo-Buddhist cult founders, one in Thailand and one in Laos, and the development of their religious movements. The rapid sociocultural change in both of these countries during the evolution of these religious movements was a major reason for the success of these two religious leaders. This is an interesting discussion in light of the recent influx into this country of a large number of Southeast Asian refugees. (TAC)

1A.056
Westermeyer, J. (1981). Mental disorders in a peasant society: Personal consequences. *Journal of Operational Psychiatry, 12*, 121-126.

Refugee/Ethnic Group: Lao

Theories of treatment modalities for mental disorders vary, as do the explanations for the causes of these disorders. This study of 35 Lao villagers who had been identified within their communities as being "baa" (crazy) was undertaken to examine whether individuals with chronic mental disorders do well in a nonindustrialized society. (TAC)

1A.057
Westermeyer, J. (1981). Opium availability and the prevalence of addiction in Asia. *British Journal of Addiction, 76*, 85-90.

Refugee/Ethnic Group: Asian

Epidemiologic data collected by several investigators in numerous communities of Asia indicate that the role of a community vis-a-vis opium production and commerce strongly influences the prevalence of addiction. Poppy producing communities tend to have the highest crude prevalence rates (i.e., over 6 addicts per 100 people). Communities involved with opium transshipment generally have intermediate rates (i.e., 3 to 6 per 100 people). End use or consuming locale have the lowest rates (i.e., under 3 per 100 people). These differences are attributed to varying drug availability in these three locations (i.e., inside most homes, passing through the community, or on demand only). Ethnicity, religion and national origin are not associated with addiction rate. It appears that community survey provides the most reliable data, while case registers may often underestimate the number of cases. (AUTHOR)

1A.058
Westermeyer, J. (1985). Sudden mass assault with grenade: An epidemic "amok" form from Laos. In R. C. Simons, & C. C. Hughes (Eds.), *The culture-bound syndromes.* (pp. 225-235). Dordecht, Holland: D. Reidel Publishing Company.

Refugee/Ethnic Group: Lao

This chapter is an examination of the occurrence in Laos of sudden mass assault (often called "amok") generally with homicide and often with suicide of the perpetrator. A total of 18 cases are described as related to the characteristics of the perpetrator (sociodemographics, geographic mobility, pre-existing mental conditions, alcohol use, precipitating events, and outcome) and the event itself (location, time of day, mortality and morbidity of the victims, and the relationship between victims and perpetrator). (TAC)

1A.059
Westermeyer, J., & Kroll, J. (1978). Violence and mental illness in a peasant society: Characteristics of violent behaviors and 'folk' use of restraints. *British Journal of Psychiatry, 133*, 529-541.

Refugee/Ethnic Group: Lao

Thirty-five people labelled as "baa" (crazy or insane) were studied in Laos--a country without psychiatrists or psychiatric institutions. Informant information was obtained for violence prior to becoming "baa," violence during the course of their "baa" condition, and violence during the seven days prior to interview. Observation for violence was made for a one day period at the time of the interview. Use of restraints was also assessed. Subjects were significantly more apt to have assaulted others, posed a risk to themselves, and been restrained (although not incarcerated) during their "baa" condition as compared to their previous state. Those in early stages of their condition (two years or less) manifested more violence than those later in their condition. "Folk" use of restraints was applied only after dangerous or violent behavior had occurred. Restraints were released as soon as practicable, but there was an "ascending" use of certain restraint measures if violence persisted. (AUTHOR)

1A.060
Westermeyer, J., & Neider, J. (1981). Mentally ill foragers and beggars in a peasant society: Their social networks and psychopathology. *International Journal of Family Therapy, 3*, 295-309.

Refugee/Ethnic Group: Lao

In this study of psychotic persons in a peasant society, there was a significant attrition in important social network structure after the onset of psychosis. The difficulties involved in providing non-reciprocal social support is noted, yet modest social support of functions may be critical. (AUTHOR)

1A.061
Westermeyer, J., & Neider, J. (1982). Variability in opium dosage: Observations from Laos, 1965-1975. *Drug and Alcohol Dependence, 9*, 351-358.

Refugee/Ethnic Group: Lao

Opiate addicts are generally believed to consume a fairly constant level of drug. These data indicate that, for most addicts over time, there is considerable variability in dosage. This variability occurs not only amongst addicts, but also in most individual addicts over time. Extreme constancy in dosage does prevail for some addicts over prolonged periods, but this is not the norm. Factors influencing dosage include age, gender, ethnicity, socioeconomic status, duration of addiction, drug cost and drug availability. Distributions in dosage patterns are presented in this report. (AUTHOR)

1A.062
Westermeyer, J., & Pattison, E. M. (1981). Social networks and mental illness in a peasant society. *Schizophrenia Bulletin*, *7*, 125-134.

Refugee/Ethnic Group: Lao

Social networks of 35 mentally ill persons were studied in Lao villages. Mental illness was associated with a decrease in size of social networks, disproportionate reliance on family, and asymmetric instrumental exchange. Nonkin "sponsors" provided assistance to those alienated from or abandoned by relatives. For those with late onset or episodic course, past accumulation of "social reserve" or "social capital" favored continuation of large networks. Size of social network was positively correlated with social function but bore little relation to psychopathology. (AUTHOR)

1A.063
Westermeyer, J., & Peng, G. (1977). Opium and heroin addicts in Laos: I. A comparative study. *The Journal of Nervous and Mental Disease*, *164*, 346-350.

Refugee/Ethnic Group: Lao

Students of narcotic addiction have believed that heroin addiction is more debilitating than the "traditional" opium addiction. Access to both opium and heroin addicts in a Laotian treatment facility provided an opportunity to test this hypothesis. All subjects were volunteer narcotic addicts seeking treatment at an inpatient detoxification facility over a 12-month period. The research format consisted of five demographic characteristics, four aspects of past narcotic usage, and three aspects of current narcotic usage. Fifty-one heroin addicts were compared to 438 opium addicts. Many of the demographic differences in the two groups reflected the urban residence of most heroin addicts and the mixed urban-rural residence of opium addicts. Heroin addicts had more frequent daily doses of drug, spent considerably more money for their drug, and required higher initial methadone doses for detoxification. It also appeared that heroin addicts might have "deteriorated" faster and thus sought treatment earlier than opium addicts. Since the heroin and opium addicts in this study differed significantly on most demographic characteristics, it was difficult to know whether these observed differences were due to drug factors or demographic factors. Thus, a study of pairs matched for age, sex, and ethnicity was subsequently undertaken to test the hypotheses generated by this study. (AUTHOR)

1A.064
Westermeyer, J., & Peng, G. (1977). Opium and heroin addicts in Laos: II. A study of matched pairs. *The Journal of Nervous and Mental Disese, 164*, 351-354.

Refugee/Ethnic Group: Lao

Fifty-one Asian heroin addicts in Laos were matched for sex, ethnicity, and age with 51 opium addicts. All subjects were voluntary patients at a treatment facility for addicts. The two groups were compared for demographic characteristics, past narcotic history, current narcotic use, and readmission within 1 year following discharge from treatment. Heroin addicts took more doses of drug per day, spent more money per day on narcotic drugs, required higher detoxification doses of methadone, and sought treatment much sooner than did opium addicts. The two groups did not differ for duration of narcotic use prior to becoming addicted, or for rate of readmission following treatment. Demographic differences in occupation and employment reflected the urban distribution of heroin addicts, and the mixed urban-rural residence of opium addicts. These data suggest that heroin is not per se more or less apt to produce addiction (i.e., is not more "addictogenic") as compared to opium. The type of narcotic drug also does not appear to be an important factor in determining treatment outcome. However, heroin does appear to be more "pathogenic" than opium, since heroin addicts sought treatment much sooner than did opium addicts. This may have been due to economic factors (i.e., heroin addicts took more doses per day, spent more time in phases of intoxication and withdrawal, and spent less time in the middle phase with work and other coping behaviors). Opium addiction is not a "benign" or "social" form of addiction. In comparison to heroin, however, opium does cost less, requires fewer doses per day, and has a less toxic withdrawal (at least in the initial phase). Moreover, opium apparently takes longer to produce life crises that motivate the addict to seek treatment. (AUTHOR)

1A.065
Westermeyer, J., & Peng, G. (1978). A comparative study of male and female opium addicts among the Hmong (Meo). *British Journal of Addiction, 73*, 181-187.

Refugee/Ethnic Group: Hmong

This study was undertaken in order to elucidate the differences and similarities between male and female opium addicts in Hmong society. Remarkably, only two differences were found: sex ratio (more male addicts) and occupation (most women reported themselves as 'housewives'). Comparison of twelve other demographic and clinical factors failed to show statistically significant differences. This study suggests that the many sex-linked clinical differences observed in the United States and elsewhere (such as earlier onset in men and more rapid course among women) are related to sex-linked sociocultural factors rather than biological differences. (AUTHOR)

1A.066
Westermeyer, J., & Wintrob, R. (1979). "Folk" explanations of mental illness in rural Laos. *American Journal of Psychiatry, 136*, 901-905.

Refugee/Ethnic Group: Lao

To obtain "folk" explanations of specific cases of mental illness the authors interviewed 35 baa (insane) Laotian individuals and their relatives and neighbors. They obtained 54 explanations; 15 focused on supernatural cases, 15 on physical causes, 14 on social problems, and 10 on psychological states. Although 31 theories (57%) focused on etiologic factors familiar to clinical psychiatrists, many self-evident factors (such as familial prevalence) were not mentioned. Except for 3 cases, responsibility for the illness was attributed to factors outside the subject's control. This view of mental illness absolves the baa person from blame and ensures support from the social group.

1A.067
Whitmore, J. K. (Ed.). (1979). *An introduction to Indochinese history, culture, language and life.* Ann Arbor: Center for South and Southeast Asian Studies, The University of Michigan.

Refugee/Ethnic Group: Southeast-Asian

This book is derived from papers presented at the first Indochinese Resettlement Education Conference held in Ann Arbor, MI, in November of 1978. The first section of the book describes the historical background against which cultural and environmental changes took place. Section II provides good descriptions of Vietnamese and Lao cultural traditions which carry the values from past to present (and presumably on into the future). Section III discusses the impact of the dislocations of the past two decades on Vietnamese, Lao and Hmong values and ways of life. (TAC)

1A. Cultural and Related Information ...

The following references (identified by their bibliography number) also contain some information relevant to 1A:

1B.015, 1B.025, 1B.039, 1B.040, 1B.043, 1B.044

1C.028, 1C.052, 1C.067, 1C.070

1D.009, 1D.011, 1D.017, 1D.021, 1D.022, 1D.023, 1D.024, 1D.029, 1D.032, 1D.035, 1D.038, 1D.046, 1D.048, 1D.054, 1D.055, 1D.057, 1D.058

1E.011, 1E.014, 1E.016, 1E.018, 1E.022, 1E.034, 1E.035, 1E.042

2A.002, 2A.005, 2A.006, 2A.007, 2A.014, 2A.015, 2A.022, 2A.026, 2A.028, 2A.037, 2A.040, 2A.041, 2A.044, 2A.047, 2A.050, 2A.052, 2A.055, 2A.056, 2A.060, 2A.063, 2A.070, 2A.071, 2A.072, 2A.073

2B.003, 2B.016, 2B.019, 2B.021, 2B.025, 2B.041, 2B.046, 2B.049, 2B.051, 2B.053, 2B.056, 2B.064, 2B.065, 2B.069

2D.005, 2D.006, 2D.007, 2D.011, 2D.013, 2D.017, 2D.022, 2D.023, 2D.026, 2D.030, 2D.033, 2D.034, 2D.035, 2D.037, 2D.038, 2D.039, 2D.042, 2D.043, 2D.044, 2D.045, 2D.046, 2D.047, 2D.048

2F.016, 2F.021, 2F.025, 2F.026

2G.014

3A.001, 3A.003, 3A.010, 3A.011, 3A.014, 3A.018, 3A.020, 3A.038, 3A.040, 3A.057

3D.003, 3D.004, 3D.005, 3D.006, 3D.008, 3D.009

3E.013

4.005, 4.006, 4.008, 4.009, 4.010, 4.011, 4.013

The reader is advised to refer to the above references for more information regarding **Cultural and Related Information about Different Refugee or Ethnic Groups.**

1B.001
Adams, B. N., & Jesudason, V. (1984). The employment of Ugandan Asian refugees in Britain, Canada, and India. *Ethnic and Racial Studies*, *7*, 462-477.

Refugee/Ethnic Group: African; Asian; Ugandan

The employment experiences of Ugandan Asian refugees in Canada, GB, and India are compared, using data on about 1,500 refugees in the 3 countries, including extensive interview data from 1,000 male heads of household. Most of the respondents had been expelled from Uganda in 1973 by order of President Idi Amin, along with approximately 50,000 other Asians; over 80% of Ugandan refugees were accepted by Canada, GB, or India. Research concerns included the following: (1) why some refugees did not seek employment; (2) why some seekers did not find work; (3) how much time passed before the first job was found; & (4) what type of work was found. Variables contributing to nonparticipation in the labor force included age, resources or means of support from relatives or friends, poor health, language difficulties, or involvement in education. While unemployment was less of a problem in Canada than in the other two countries, employment often entailed substantial downward mobility for professionals, business people, and skilled manual workers. India presented the tightest job market. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.002
Brown, B. S. (1983). A new perspective on the political and psychological nature of borders and sovereignty. *Canadian Journal of Psychiatry*, *28*, 597-601.

Refugee/Ethnic Group: General

In a paper presented at the 33rd annual meeting of the Canadian Psychiatric Association, Ottawa, Ontario, Sept 1983, the author discusses some aspects of immigration and refugee movements in relation to their psychological dimensions. Global flows are defined as large-scale movements of information, technology, money, and people across national boundaries. Their complex, controversial consequences for national identity, productivity, sovereignty, and security are considered. It is concluded that peace of soul and peace in the world can be achieved only when interdependence across borders is faced and mastered. ((c)APA)

1B.003
Chakraborty, A. (1978). Migration and urbanization problems in Calcutta. *Mental Health & Society*, *5*, 72-78.

Refugee/Ethnic Group: Indian

45

Discusses the massive migration into Calcutta when India was divided in 1947 and afterwards. Assimilation of these refugees into the city's social structure and its effects on the living pattern, crime, and mental illness are discussed. ((c)APA)

1B.004
Dube, S. M. (1967). Displacement, social mobility and conformity with the out-group. *Interdiscipline*, *4*, 124-136.

Refugee/Ethnic Group: Pakistani

Displacement is a world-wide phenomenon and it creates a number of social, económic and demographic problems. Just on the eve of independence in 1947, the Indian sub-continent was divided into two unions known as India and Pakistan. The bulk of the population was forced to leave their original place of residence. The present paper is based on the study of displaced persons coming from Pakistan to India and its focus is on two hypotheses. 1) Displacement causes spatial and occupational mobility. 2) Displacement may be accounted for by a) deprivation and anticipatory socialization; b) bringing about changes in social institutions and system of values; and c) creating the problem of conformity with the out-group. (TAC/AUTHOR)

1B.005
Ehrentheil, O. F. (1979). The effects of various degrees of social pressure. *Mental Health Society*, *5*, 141-150.

Refugee/Ethnic Group: Jewish; Black

If the social pressure exerted against a minority is overwhelming (slavery, concentration camps) no cultural efforts of the slaves or prisoners can be expected. Absence of any pressure is not conducive to high achievements either. A moderate degree of social pressure especially when combined with a possibility of social acceptance will stimulate minority people to perform well and to try to achieve status and acceptance. The cultural climate in which persons belonging to the minority grew up often determines their choice of endeavor in which to prove themselves and to achieve. Arthur Toynbee's thesis of the importance of Challenge and Response for the evolution of civilizations and Hans Selye's concept of stress in biology are related to the proposed hypothesis. The author shows the usefulness of his hypothesis on examples from the history of Blacks in America and of the Jews. (MEDLINE/AUTHOR)

1B.006

Eichenbaum, J. (1975). A matrix of human movement. *International Migration, 13*, 21-41.

Refugee/Ethnic Group: General

Migration theorists typically ignore forced population movements, considering only voluntary movements. A detailed classification of movement types is set forth, in which decision to migrate & choice of destination may be purely individual, purely social, or mixed; the purely individual cases however, presumably are not represented in the real world. Migrants of the classic type decide to move & choose destinations through partly voluntary & individual processes. Refugees have the choice to move forced on them but pick their own destinations. Allocatees choose to move but have destinations chosen, as when men who have joined the army voluntarily are assigned to bases. Slaves move entirely under duress. Migrators can be divided into active & passive (migrating to places where someone else has migrated) subgroups. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.007

Gould, W. T. S. (1974). Refugees in tropical Africa. *International Migration Review, 8*, 413-430.

Refugee/Ethnic Group: African; Sudanese; Angolan; Rwandon; Burundian; Zairian

There are over 1,000,000 refugees in Africa, though demographic data are of limited accuracy & precise counts are difficult. Zaire has more refugees than any other country, including 4000 Angolans, & Sudanese, Rwandans, & Burundians. Uganda has another 180,000 from Zaire, Rwanda, & Sudan. There are few refugees in west Africa. Refugees do not fit into the usual categories of migrants, but must be seen as one subgroup within population movement. African nations face problems of definition, i.e., Rwandans in Uganda include refugees who fled after the Tutsi monarchy's fall; persons already living in Uganda but unable to return because of the overthrow; labor migrants & members of Rwandan tribes traditionally resident in Uganda but Rwandan by Ugandan law. Refugees in Africa, unlike other refugees, are no poorer than natives; they may contribute to the refuge nation's economy by colonizing sparsely inhabited regions. Economic patterns include spontaneous individual settlement, movement into organized refugee areas, & movement to cities. Success of settlements depends on (1) expectations of staying or returning quickly, (2) those expecting to take up permanent residence investing far more in becoming self-sufficient, (3) native attitudes, & (4) conditions in the areas settled. Voluntary repatriation, the best solution, has been limited: the return of 180,000 Sudanese refugees in

1972--a breakthrough in repatriation efforts--left the returnees facing considerable developmental problems. Other refugees have little likelihood of return. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.008
Hiniker, P. J. (1969). Chinese reactions to forced compliance: Dissonance reduction or national character. *Journal of Social Psychology, 77*, 157-176.

Refugee/Ethnic Group: Chinese

Constitutes an experimental test of forced compliance dissonance reduction tendencies against the predictions of a characterological theory of Chinese reactions to forced compliance. The experiment was concluded in Hong Kong in 1964 with 50 refugees from mainland China. The experimental situation involved the delivering of counterattitudinal statements regarding the changing level of rice rations on mainland China under variable levels of inducement. The results generally support the characterological predictions as against those of dissonance reduction due to forced compliance. Of particular importance in the characterological explanation of the results was the tendency of Chinese as compared to Americans to maintain a separation between overt formalism and covert feelings. ((c)APA)

1B.009
Hoskin, M., & Mishler, W. (1983). Public opinion toward new migrants: A comparative. *International Migration, 21*, 440-462.

Refugee/Ethnic Group: General

Public opinion toward recent migrants is examined in Britain, West Germany, and the United States. Based upon information obtained from public opinion surveys conducted in each of the three countries, the public's hostility or receptivity to immigrants is discussed. (POPLINE/TAC)

1B.010
Huyck, E. E., & Bouvier, L. F. (1983). The demography of refugees. *The Annals of the American Academy of Political and Social Science, 467*, 39-61.

Refugee/Ethnic Group: General

The numbers & backgrounds of major refugee movements are outlined, & the profiles of future movements are suggested, especially those significant to United States immigration policies & aid programs in situ. A refugee is defined as one fleeing from physical danger, persecution, economic hardship, or other "push factors" at home, & intending ultimately to return, rather than leaving due to "pull factors" of the host country. Africa, Europe, the Middle East, Latin America & the Caribbean, Indochina, & other areas are analyzed separately, & their roles as senders & receivers of refugees are traced. It is difficult to gather accurate data on current movements & predict future developments; however, continued political instability, food shortages, & unemployment throughout the Third World suggest clearly that the refugee phenomenon will persist unabated in the foreseeable future. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.011
Jacobson, G. I. (1977). The refugee movement: An overview. *International Migration Review, 11*, 514-523.

Refugee/Ethnic Group: General

If one accepts that it is a basic human right to leave the country of one's birth, then one must accept that it is immoral to hinder migratory movement. One need only consider the consequences of the Nazi hegemony over Europe, when escape routes were blocked, to understand the potential for human suffering when this human right is smothered. Political, religious or economic oppression, & military pressure create the refugee. Herein is recounted, continent by continent, the refugee populations of the world & the fundamental reasons why each group exists. In that, in global terms, the refugee populations are so large, it is difficult to fathom the extent of the problem. One must envision the individual behind the statistic to have rapport with the problem, & ultimately to have any idea how the impact of the enormous loss of life (whether because of war or other calamity) has tended to accustom & harden normal human reactions of compassion on the part of the refugee. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.012
Klein, K. J. (1980). Indochinese refugees and Cuban entrants. *Clinical Psychologist, 34*, 15-16.

Refugee/Ethnic Group: Southeast-Asian, Cuban

Presents an overview of the refugee and entrant situation in the US, describing particular stresses of the journey and the resettlement process for Indochinese refugees and Cuban entrants. ((c)APA)

1B.013

Kleinman, H. H., & Daniel, J. F. (1981). Indochinese resettlement: Language and social services. *International Migration Review*, *15*, 239-245.

Refugee/Ethnic Group: Southeast-Asian

Analysis of the problem faced in teaching English as a second language to Indochinese refugees. Authors suggest that, unlike the well-educated Soviet refugees, those from Southeast Asia are neither good language "learners" since they lack a grammatical base in their own language, nor good language "acquirers" since they lack extensive opportunities for English language usage. Classroom solutions involve more relevant topic selection, de-emphasis of formal rules, small group interaction activities, and emphasis on appropriate listening behavior. Even more important is the development of language acquisition systems outside the classroom. (NIUCSEAS)

1B.014

Kunz, E. F. (1973). The refugee in flight: Kinetic models and forms of displacement. *International Migration Review*, *7*, 125-146.

Refugee/Ethnic Group: General

It is contended that (a) only through the analysis of many past refugee movements can recurring elements of refugee phenomena be conceptualized; (b) such conceptualization is necessary in order to create a theory of refugee migrations which would be capable of resolving apparent contradictions & would lead to typologies & models with power to explain causalities & capacity to predict should similar situations occur. The kinetics of refugee movements are analyzed which carry the migrant from his country of birth to his country of settlement, & have selective effect on the participants, & in turn also condition eventual refugee outcomes. A distinction is made between various subtypes of anticipatory & acute refugee movements, & attention is drawn to the importance of the affinitive nature of the vintage-wave patterns. In addition, a typology of acute displacement forms is drawn up, under the headings of displacement by flight, displacement by force, & displacement by absence. Attention is drawn to the fact that displacement forms too may influence the composition of the displacement groups & affect the future of those involved. To indicate the potential of the typologies to predict the 'mix' of participation, a table is drawn up showing categories of displacement groups & the demographic bias of the participatory types by expected convergences in sex, age, & educational level. No effort is made to assess the politico-emotional characteristics of vintages, the effect of the various kinetic patterns & displacement forms, nor the impact of multi-vintage patterns on refugee outcomes. It is suggested that though the concepts, typologies & models introduced may themselves be of use, their full advantage can be realized only after the introduction of further theoretical concepts, relating to the home background, & transit & settlement variables of refugees. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.015

Kunz, E. F. (1981). Exile and resettlement: Refugee theory. *International Migration Review*, *15*, 42-51.

Refugee/Ethnic Group: General

Regardless of whether a refugee chooses to leave the country of birth by an anticipatory flight, or is carried into exile in an acute refugee situation, refugees in their social relationship to the population of the home country which they leave behind appear to fall into three identification catagories. The "majority identified" refugees identify with the nation, but not with its government. This group believes that their opposition to events is shared by the majority of their compatriots. The "events-alienated" refugees are ambivalent or embittered in their attitude toward their former compatriots. They see themselves as rejected by the nation they formerly identified with and they often are religious or racial minority groups. The "self-alienated" group consists of people who for varied reasons have no wish to identify with the nation. In addition, members of these groups may have "active" or "reactive" attitudes toward displacement. An array of host related factors are discussed including cultural compatability, population policies, and social attitudes. The author concludes with a list of 15 predictive hypotheses which demonstrate the potential use of this type of theoretical work. (TAC)

1B.017

Lewis, H. P., & Lewis, E. R. (1965). Written language performance of sixth-grade children of low socio-economic status from bilingual and from monolingual backgrounds. *Journal of Experimental Education*, *33*, 237-242.

Refugee/Ethnic Group: General

The written language performances of monolingual, Chinese bilingual, and Spanish bilingual sixth-grade girls and boys similar in IQ, scholastic backgrounds, and social class were compared in a California community. The language performance task which was written in English revealed that, in general, bilingualism does not appear to have an effect upon written language performance. While sex and bilingual-monolingual differences were found in specific comparisons such as in grammatical errors, spelling, verbal output, and vocabulary, the authors conclude that bilingualism may, in fact, aid certain written skills. (HAAPIMH)

1B. Research on Refugee Experience/Behavior ...

1B.018
Liu, W. T., & Cheung, F. (1985). Research concerns associated with the study of Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 487-516). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian; General

Conceptual and research problems which arise when dealing with refugee migration issues are illustrated. Major weaknesses often found in refugee research are outlined. These include: a cross-sectional view of refugee life, rather than a longitudinal perspective; inaccurate and incomplete definitions of refugee status; limitations in the collection of data on refugees; lack of research on the role of sponsors; issues in the resettlement process; the role of support groups and the effect of various stressors in the area of refugee mental health; and the lack of research upon the refugee community as a social group. (TAC)

1B.019
Liu, W. T., Lamanna, M., & Murata, A. (Eds.). (1979). *Transition to nowhere: Vietnamese refugees in America.* Nashville, TN: Charter House Publishers.

Refugee/Ethnic Group: Vietnamese

The fall of South Vietnam in 1975 focused public and private attention in the U.S. on how to receive, care for, resettle and cope with the problems of refugees. The book outlines the initial creation or designation of refugees, from both the subjective (refugee) and objective (societal reaction) points of view and follows the stages of the refugee career. These are flight, transit, sojourn in camp, sponsorship out and subsequent immediate resettlement, and long-term adjustment (only speculative comment here). The conflict between the refugee perspective and that of the receiving society is compared within each career stage. Chapters on unaccompanied children, sponsorship, and resettlement are included, as well as a chapter dealing specifically with the mental health of the refugees. The book is the first of a two-part series about the Vietnamese population in the U.S., dealing with the first ninety days after the fall of the Thieu government until a satisfactory program could be worked out to settle some 140,000 refugees in various communities. (HB-SARS/TAC)

1B.020
McInnes, K. M. (1981). Secondary migration among the Indochinese. *Journal of Refugee Resettlement, 1*, 36-42.

Refugee/Ethnic Group: Southeast-Asian

Examines the incidence of secondary migration (movement from the site of initial placement to another location in the U.S.) among Indochinese refugees initially placed in Wisconsin. Discusses characteristics of refugees who moved, comparing them with Americans in general. Suggests ways sponsoring agencies can deal with secondary migration. (NIUCSEAS)

1B.021
Montero, D. (Ed.). (1979). *Vietnamese Americans: Patterns of resettlement and socioeconomic adaptation in the United States.* Boulder, CO: Westview Press.

Refugee/Ethnic Group: Hmong; Vietnamese

The unique migration of the Vietnamese refugees to the United States is documented and analyzed. Data from a national sample are presented on areas such as the refugees' employment, education, income, receipt of federal assistance, and proficiency in the English language. The author uses his model of Spontaneous International Migration (SIM) to place the Vietnamese immigration into a broader socio-historical context. Three appendices are included which cover: 1) the chronology of events leading to the withdrawal of American troops from Vietnam and the eventual resettlement of the Vietnamese in the U.S.; 2) sample comparisons; and 3) supplemental tables. A selected bibliography on the Vietnamese experience in America is also presented. (HB-SARS/TAC)

1B.022
Montero, D. (1979). Vietnamese refugees in America: Toward a theory of spontaneous international migration. *International Migration Review, 13*, 624-648.

Refugee/Ethnic Group: Vietnamese

A model is proposed to describe the spontaneous migration pattern of Vietnamese refugees compared to the more traditional immigration pattern of other Asians in the United States. Data were drawn from 5 separate samples beginning with a survey of the status of 1,570 refugees settled in the United States as of July 1975. Overall results indicate that French & United States influences on these refugees provided them with an advantage over earlier Asian immigrant groups. Continuous improvement in the employment status of respondents is noted. Assimilation patterns of Vietnamese refugees are compared with those of other Asian groups, & their future assimilation is projected. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.023
Morrison, D. (1973). Intermediate variables in the association between migration and mental illness. *International Journal of Social Psychiatry, 19*, 60-65.

Refugee/Ethnic Group: General

A representative selection of the types of studies available on the relationship between migration and mental illness is reviewed. It is suggested that the major failure of these studies is the incomplete consideration of the intermediate variables linking migration and mental illness. An analytic framework incorporating ten intermediate variables is presented. The variables include personality, life experiences, cultural background, reason for leaving old environment and moving to a new location, stress of move, attitude of environment to migrant, homogeneity of immediate environment, and fulfillment of expectations and aspirations. Implications for future research are discussed. (TAC)

1B.024
Morrissey, J. A. (1983). Migration, resettlement, and refugeeism: Issues in medical anthropology. *Medical Anthropology Quarterly, 15*, 11-14.

Refugee/Ethnic Group: General

There are many patterns for migration, resettlement, & refugeeism, each with its own specific implications for health care. For instance, the amount of time used to make & implement plans for migration can vary widely. The situation of the refugee who must flee his home at a moment's notice is very different from that of the family with plenty of time & other resources to plan their relocation. To study the health of migrants & refugees, it is necessary to provide data from the point of origin, the host population, & the migrants themselves. Mental health is the most thoroughly studied aspect of migrant health. The migration experience can lead to long-term psychological adjustment problems, especially for involuntary refugees. Other medical aspects of migration include: lower fertility levels of migrant women, disease epidemiology, & the "brain drain" of skilled physicians from developing to developed countries. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.025
Pakrasi, K. (1966). Caste, family structure and mode of migration among the refugees of West Bengal, 1947-48. *Indian Journal of Social Research, 7*, 145-154.

Refugee/Ethnic Group: Bengalese

The present study has particularly attempted to highlight in terms of their caste-affiliation the behavior of the displaced persons of West Bengal towards (1) mode of migration beyond erstwhile East Bengal and within West Bengal and (2) mode of family living after migration in rural and urban areas of West Bengal. The factor of caste has been found to have caused noteworthy discrimination in the overt actions of the immigrants in question towards migration as well as family organisation after migration. These actions appear to be neither individual nor random phenomena. Rather, the existence of some sort of a pattern of behavior by the immigrants differentiated by their caste-bearings remains dominant. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.026
Pankhurst, A. (1984). Vulnerable groups. *Disasters, 8*, 206-213.

Refugee/Ethnic Group: Sudanese

A discussion of the concept of refugee vulnerability, based on aid agency experience in eastern Sudan. Refugees usually arrive in their host country with a bare minimum of possessions, & can be classified as vulnerable; however, a certain category is especially at risk & doubly in need of assistance, e.g., medically & socially disadvantaged cases. If they can be helped to overcome, or reduce, their handicaps, they can become self-reliant, active, productive members of their community. While their able-bodied companions work in the fields or the towns, these refugees can be trained for employment in work that does not require great mobility or physical fitness (e.g., handicrafts, trade, teaching, & services). (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.027
Ray, J. R. (1983). Ambition and dominance among the Parsees of India. *Journal of Social Psychology, 119*, 173-179.

Refugee/Ethnic Group: Parsee

The Parsees are Indians who descended from Zoroastrian refugees fleeing Persia at the time of the Moslem conquest, and are highly westernized and economically successful. A sample of 90 Ss in the Bombay Parsee community answered a questionnaire that included scales of achievement motivation, authoritarianism, neuroticism, and social desirability. The same scales had previously been administered to a random sample (305 Ss) of the general population of Bombay and to 100 Bombay residents with college education. When compared with other Indians, Parsees were low on achievement motivation and high on interpersonal authoritarianism. The previous sample showing a level of achievement motivation nearest to that of the Parsees was a sample of 101 Los Angeles residents. Results are consistent with previous findings showing that, contrary to D. C. McClelland's (1961) thesis, economic success was associated more with dominance than with ambition. ((c)APA)

1B.028
Rose, P. I. (1981). Some thoughts about refugees and the descendants of Theseus. *International Migration Review*, *15*, 8-15.

Refugee/Ethnic Group: General

The historical & literary traditions of the exile-refugee are outlined as a context for a reconsideration of the lack of social-scientific concern for their particular problems & of current trends in United States refugee policy. It is asserted that sociology has yet to seriously investigate the character of exiles' collective experience & their position within a web of sociopolitical relations. The Refugee Act of 1980 is seen as a positive development, in its separation of refugees from migrants & its recognition of the differing needs of differing refugee communities. The necessity, both practical & moral, of the United States maintaining a generous "open arms" policy toward refugees is defended. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.029
Rose, P. I. (1981). South East Asia to America: Links in a chain (part two). *Migration Today*, *9*, 22-33.

Refugee/Ethnic Group: Southeast-Asian

This article is the second in a series of reports on the resettlement of Southeast Asian refugees in the United States. The focus of this article is on the refugees' movement from Southeast Asia to the U. S. and their first confrontation with Americans in America. The various activities of the refugee workers are discussed. (POPLINE/TAC)

1B.030
Sayigh, R. (1977). The Palestinian identity among camp residents. *Journal of Palestine Studies*, *6*, 3-22.

Refugee/Ethnic Group: Palestinian

A set of standardized interviews, focusing on the Palestinian experience & identity, was carried out in April/May 1975, & contained fifteen questions covering the following: (1) experiences through which the respondent first became aware of being Palestinian, (2) evaluations of a wide range of influences (family, friends, school, national literature, books, political activity) in deepening this awareness, (3) descriptions of "the Palestinian people" & of changes in their social character since 1948, (4) perceptions of the effects of living in camps, (5) goals of the Palestinians & the relationship of the individual to them, (6) perception of problems facing Palestinians & sources of strength in overcoming them, & (7) choice of an alternative identity. The sample consisted of 20 people from a refugee camp near Beirut (ages 17-60) from a wide range of socioeconomic levels (within a camp environment), of all political persuasions & both sexes (13 males, 7 females). The development of a Palestinian identity has the following focal points: (A) a history differing greatly from other Arab peoples, (B) displacement, dispersion, poverty, oppression, & non-Palestinian control, (C) uncertainty in Arab support, (D) development of other regional Arab identities (eg, Jordanian, Syrian), (E) the rise of the PLO & the resistance movement, & (female) kin solidarity & ex-rural Palestinian neighbor networks. Regional differences are secondary to the feeling of homelessness. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.031

Sayigh, R. (1978). The struggle for survival: The economic conditions of Palestinian camp residents in Lebanon. *Journal of Palestine Studies*, *7*, 101-119.

Refugee/Ethnic Group: Palestinian

Based on descriptions from the personal experiences of Palestinian refugees, a discussion of the economic conditions of Palestinian camp residents in Lebanon is presented. Several distinctions are made between the oppression experienced in Israel & that in Arab host countries. Although it is felt that the Israelis systematically persecuted the Palestinians in order to make a Jewish state, persecution of Palestinians in Arab countries is considered the result of a threat the Palestinians presented to either the coalition of minorities that formed the regime of Arab host countries or the Western connections of Arab regimes. In addition, Israeli control is seen as based on an overt military government, whereas Arab control is seen as based on a covert military government. Social existence of Palestinians in political exile is characterized by the lack of property ownership, which led to a state of nonrespect & a disruption of the network of family & village ties. In the beginning, Palestinian refugees in Lebanon experienced the consequences of extreme poverty: lack of food & water, inadequate shelter, & limited availability of work. Refugees in Beirut had an advantage, because of their proximity to the UNRWA's head office, large offices & banks, three universities, & many small private training establishments. Improvements in the Palestinian economic system is limited by the lack of an independent economy. Vulnerability to economic bargaining is a consequence of land loss. Obligatory work permits reduced the bargaining power of Palestinian workers. Work available is limited to digging roads, building, moving snow, restaurant service, cleaning work, & unskilled industrial work. Workers are subject to periodic unemployment, job insecurity, low wages, no benefits, & the lack of legal protection. An additional factor contributing to Palestinian poverty is the unequal quality & availability of education. Not only are classes in UNRWA schools too large, but there also exists an inadequate number of instructors, space, & equipment. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.032
Sirhan, B. (1975). Palestinian refugee camp life in Lebanon. *Journal of Palestine Studies*, *4*, 91-107.

Refugee/Ethnic Group: Palestinian

A study of Palestinian refugee camps in Lebanon was conducted, using data from United Nations Relief Works Agency statistics & from a June 1971 manpower survey conducted by the Statistics department of the Lebanese Ministry of Planning. In addition, participant & nonparticipant observation of the camps was conducted from 1969 to 1973. Most camps are located on stretches of uncultivated land or on abandoned French military sites. Most camps are equipped with brick buildings, private or semiprivate latrine facilities, & water distribution systems. However, some camps have been equipped with above-ground sewage systems, which are subject to flooding during the winter months & mosquito infestation during the summer. The seventeen camps under examination are characterized by extreme overcrowding, with a combined population of approximately 150,000. Most of the inhabitants (65%) are under nineteen years of age. Marriages continue to be arranged by elders & divorces are infrequent. Education is provided at the camps by the government of Kuwait & by the Palestinian Liberation Organization. Illiteracy is high, but exaggerated reports make actual determination difficult. The camps are sites of depressed economic conditions; low wages, high unemployment, & lack of training are prevalent problems. The camps remain socially conscious, often focusing on previous village associations or regional ties. Camp members are intensely interested in politics, & leadership is firmly in the hands of the Palestine Liberation Movement. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.033
Starr, P. D. (1981). Troubled waters: Vietnamese fisherfolk on America's Gulf Coast. *International Migration Review*, *15*, 226-238.

Refugee/Ethnic Group: Vietnamese

Reports on a continuing study, initiated in 1977, of the experience of Vietnamese refugees who settled as fisherfolk in communities on the Gulf Coast, primarily in West Florida. Focuses particularly on the refugees' relationships to established local fishing interests. (NIUCSEAS)

1B.034
Starr, P. D. (1981). Vietnamese fisherfolk and how they grew. *Migration Today, 9*, 11-16.

Refugee/Ethnic Group: Vietnamese

The settlement of Vietnamese fishermen on the Gulf Coast has irretrievably altered the fishing industry and the nature of many coastal communities. This article discusses the short history of the Vietnamese fisherfolk in this country, the responses by local fishermen and their communities, and the cultural differences between the two groups. (POPLINE/TAC)

1B.035
Starr, P. D., & Roberts, A. E. (1981). Attitudes toward Indochinese refugees: An empirical study. *Journal of Refugee Resettlement, 1*, 51-61.

Refugee/Ethnic Group: Southeast-Asian

Describes past American attitudes toward Asian immigrants and analyzes contemporary views of Indochinese held by residents in the following nine areas where refugees have settles: Dothan and Mobile, Alabama; Panama and Pensacola, Florida; New Orleans, Louisiana; and Oakland, San Francisco, San Jose, and Stockton, California. (NIUCSEAS)

1B.036
Starr, P. D., & Roberts, A. E. (1982). Attitudes toward new Americans: Perceptions of Indo-Chinese in nine cities. *Research in Race and Ethnic Relations, 3*, 165-186.

Refugee/Ethnic Group: Southeast-Asian

The nature of anti-Asian prejudice & discrimination in the United States is described. The results of a questionnaire survey of northern California & Gulf Coast residents (total number of cases = 745) concerning their experience with, & attitudes toward, Indochinese refugees are presented. Negative views tend to reflect traditional patterns of prejudice against other Asian groups & are associated with political conservatism, low education, lower occupational status, Christian fundamentalism, & other characteristics that have been linked with antiblack prejudice. Those who had actual contact with the refugees in work or home settings had more positive views of them. There were also indications that the Indochinese served as "scapegoats" for some who were frustrated over concerns they could do little about. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.037
Stein, B. N. (1981). The refugee experience: Defining the parameters of a field of study. *International Migration Review, 15*, 320-330.

Refugee/Ethnic Group: General; Southeast-Asian

Reviews the stages of the refugee experience: perception of a threat; decision to flee; period of extreme danger and flight; reaching safety; camp behavior; repatriation; settlement or resettlement; adjustment and acculturation; and residual states and changes in behavior caused by the experience. Relates, in part, to Indochinese refugees. (NIUCSEAS)

1B.038
Stein, B. N. (1986). The experience of being a refugee: Insights from the research literature. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 5-23). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

This chapter provides a general social science overview on refugee research. The author challenges the widely held assumption that refugee problems are unique, isolated, and nonrecurring. He describes the problems inherent in doing research on refugees and points to the need of a multidisciplinary approach. He concludes that there is a refugee experience that leads to certain behavioral outcomes regardless of a particular refugee's cultural or ethnic background. Some of the issues covered in this chapter include behavior in refugee camps, traditional versus "new" refugees, resettlement, assimilation, acculturation, culture shock, adjustment, and frequently occuring psychiatric diagnoses in refugees. The author points to areas in need of further research. (TAC)

1B.039
Sughandabhirom, B. (1986). Experience in a first asylum country: Thailand. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 81-96). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Cambodian; Southeast-Asian

The author presents the perspective of a Thai psychiatrist in dealing with refugees in a first asylum country. She describes some of the effects on the Thai people of the refugee exodus. Next she presents information about the cultural background of the Southeast Asian refugees, describes common health problems (including mental health), and presents data from a pilot research project conducted at Khao I Dang, a Cambodian refugee camp. A description of Khao I Dang is presented in an appendix to the chapter. (TAC)

1B.040

Thong, T., Anh, D. D., Hoang, V., & Tieu, A. K. (1981). The resettlement experience: The refugee perspective. *Journal of Refugee Resettlement, 1*, 5-6.

Refugee/Ethnic Group: General; Southeast-Asian

Four students from the English as a Second Language program for adults at the Arlington (Virginia) Career Center respond in their own words to the question "What does resettlement mean to you?" (NIUCSEAS)

1B.041

Tyhurst, L. (1951). Displacement and migration. *American Journal of Psychiatry*, 561-568.

Refugee/Ethnic Group: General

This paper reports clinical findings in the psychiatric study and treatment of 48 displaced persons. Two phases of the psychological reactions following arrival are outlined. The first phase lasts about two months after arrival and is characterized by (a) subjective sense of well-being, (b) increased psychomotor activity, (c) interest in the new environment focusing on fulfillment of immediate and basic needs, and (d) a sense that no one can understand his/her war experiences. The second phase is marked by (a) an increasing awareness of the present social situation and its implications for the future, (b) retrospectively idealizing the distant past and childhood, (c) psychiatric reactions which tend to become obvious and reach their peak at about six months after arrival. Common reactions followed three main trends: (l) suspiciousness and paranoid trends, (2) anxiety and depression, (3) somatic complaints. These findings are briefly discussed with an emphasis upon the psychosocial dynamics of mobility. The differences between the displaced person and the ordinary prewar immigrant are outlined. (TAC)

1B.042

Volek, Z. (1978). Changing characteristics of refugees as immigrants to Australia. *International Migration, 16*, 43-51.

Refugee/Ethnic Group: General

Immigrants to Australia during the nineteenth & twentieth centuries are categorized as legal, illegal, voluntary, & involuntary. Motive is seen to be the classifying factor between voluntary & involuntary migrants, with involuntary migrants, or refugees, having less control over their motives. Since migration is likely to continue on an even greater level in all four categories, it is important that knowledge & understanding of their different characteristics be improved. Particularly in the case of refugees, acceptance & help will reduce the trauma of this experience. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1B.043
Westermeyer, J. (1980). Sex ratio among opium addicts in Asia: Influences of drug availability and sampling method. *Drug and Alcohol Dependence*, *6*, 131-136.

Refugee/Ethnic Group: Southeast-Asian

The literature on opium addiction in Asia reveals widely different sex ratios. Analysis of these reports indicates that community surveys provide the most reliable and valid ratios. Surveys in psychiatric hospitals appear to overreport women, while case registers and surveys in addiction treatment facilities, vends and dens overreport men. The relative proportion of female addicts is greatest in poppy-producing areas and in communities with high prevalence rates of addiction. Instrumental mechanisms for these observations are explored. (AUTHOR)

1B.044
Westermeyer, J. (1981). A comparison of three case finding methods for opiate addicts: A study among the Hmong in Laos. *The International Journal of the Addictions*, *16*, 173-183.

Refugee/Ethnic Group: Hmong

Various case finding techniques have been employed in the study of narcotic addiction. Each method contains its own bias, though their nature and extent are often not clear. This study was undertaken to evaluate the bias of three case finding techniques: (1) a field survey of addicts (n=28), (2) patients voluntarily seeking treatment for addiction at the medical facility (n=81), and (3) patients voluntarily seeking help for addiction at a Buddhist monastery (n=118). All subjects belonged to the Hmong ethnic group, a tribal people of southeast Asia who grow the opium poppy as a cash crop. Despite the variability in sampling methods, most factors did not show significant differences. These included sex ratio, marital status, occupation, duration of addiction, and number of opiate doses per day. Some differences were noted in current age, age at addiction, and mode of using opium. Possible causes for those observed differences are explored. (AUTHOR)

The following references (identified by their bibliography number) also contain some information relevant category **1B:**

1A.013, 1A.014, 1A.015

1C.003, 1C.005, 1C.006, 1C.058, 1C.062, 1C.063, 1C.065

1D.018, 1D.021

1E.004, 1E.007, 1E.008, 1E.013, 1E.025, 1E.033, 1E.034, 1E.035, 1E.037, 1E.045, 1E.047

2A.003, 2A.005, 2A.009, 2A.010, 2A.018, 2A.019, 2A.030, 2A.032, 2A.034, 2A.053, 2A.054, 2A.062, 2A.064, 2A.070

2B.021, 2B.023, 2B.025, 2B.046, 2B.048, 2B.052, 2B.055, 2B.059, 2B.070

2E.009

2F.016, 2F.026

3A.035

3C.002

4.011

The reader is advised to refer to the above references for more information regarding **Research on the Refugee Experience and Behavior**.

1C. Policy Issues ...

1C.001
Ahmed, P. I., Tims, F., & Kolker, A. (1980). After the fall: Indochinese refugees in the United States. In G. V. Coelho & P. I. Ahmed (Eds.), *Uprooting and development: Dilemmas of coping with modernization.* (pp. 497-511). New York: Plenum Press.

Refugee/Ethnic Group: Southeast-Asian

The U. S. has opened its doors four times to refugees since 1945 - to the Hungarians in 1956, the Cubans in 1960 and again in 1980, and those from Indochina in 1975. Each of these cases has been markedly different in its circumstances. This paper concentrates only on the wave of Indochinese refugees entering the U. S. in 1975-76, and on the unique problems it presented for American policy makers. Major policy assumptions and the mechanisms by which policy was developed and implemented are examined, as well as policy issues of cultural adjustment, service delivery, and long term mental health questions. Demographics of the refugees as well as a list of the chief causes of refugee anxiety are also included. (NIUCSEAS/TAC)

1C.002
Bach, R. L. (1980). Cuba in crisis. *Migration Today*, *8*, 15-18.

Refugee/Ethnic Group: General; Cuban

The author describes the refugee services available at the time of the 1980 influx of Cuban refugees. Demographics are provided for the early arrivals including age, marital status, knowledge of English, last residence, education, occupation and economy. There is also a discussion of the impact of the refugees on Miami's economy. (POPLINE/TAC)

1C.003
Bach, R. L. (1980). Employment characteristics of Indochinese refugees: January 1979. *Migration Today*, *8*, 10-14.

Refugee/Ethnic Group: Asian; Cambodian; Lao; Vietnamese

Summarizes Immigration and Naturalization Service (INS) data on demographic characteristics and employment of Indochinese refugees. Reports that employment increases with time in the United States, and that refugee dependence on public assistance will be reduced. (NIUCSEAS)

1C. Policy Issues ...

1C.004
Bach, R. L. (1984). Policy debates and the refugee experience. In L. F. Tomasi (Ed.), *In defense of the alien, v. 6: Immigration and refugee policy.* (pp. 175-188). New York, NY: Center for Migration Studies.

Refugee/Ethnic Group: General

In this book chapter, the author examines several policy rationales for restructuring the refugee resettlement program. He takes issue with the argument that refugee resettlement will be more successful if refugees move into the mainstream of American life, become more self-sufficient, and rely more heavily on the private sector. (POPLINE/TAC)

1C.005
Bach, R. L., & Bach, J. B. (1980). Employment patterns of Southeast Asian refugees. *Monthly Labor Review*, *103*, 31-38.

Refugee/Ethnic Group: Southeast-Asian

Studies of Indochinese migration show that most of the earlier refugees from Asia found jobs and have had gradual income gains. Recent arrivals are comparatively less educated and face more employment problems because of economic conditions. Tables on labor force participation, employment levels, and occupational distribution are included. (NIUCSEAS)

1C.006
Berman, G. S. (1982). Reaction to the resettlement of World War II refugees in Alaska. *Jewish Social Studies*, *44*, 271-282.

Refugee/Ethnic Group: German; Jewish; Scandinavians; Baltic

Plans & resolutions to resettle German-Jewish refugees in Alaska in the years 1938-1941, & then after World War II, are examined on the basis of government documents held in the University of Alaska Archives, Fairbanks, of actual plans proposed by department of the Interior officials & national legislators, & reactions to these plans by officials in Washington, DC, & Alaska, newspaper articles, editorials, & letters from Alaskan citizens. The plans for resettling refugees before the war, which were unsuccessful, encountered three types of reactions: nativism, anti-Semitism, & economic insecurity. After the war, a renewed effort to resettle displaced persons in Alaska was met with more positive responses. Whereas the prewar, mostly Jewish, refugees were seen as unadaptable, as taking jobs from residents, & as saturating United States culture with alien ways, the postwar refugees, mostly non-Jewish from Baltic & Scandinavian countries, were seen as hard-working pilgrims adaptable to United States ways &

Alaskan climate. In spite of the difference in responses, however, the postwar group did not reach Alaska either. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.007

Bernard, W. S. (1967). The integration of immigrants in the United States. *International Migration Review*, *1*, 23-32.

Refugee/Ethnic Group: Cuban

Since World War II, 45 million people have been uprooted and dislocated, creating a mobility that might well describe this period as "The Era of the Refugee." The United States has received more immigrants than any other country. The history of immigrant integration in the U.S. has evolved through three major phases: 1) the early period of "natural selection" when integration was accomplished by the individual newcomer on his own initiative; 2) the second phase of indirect government interaction when immigration laws were written and quotas were enforced; and 3) the third phase of "assisted integration" where the immigrant received assistance in his/her cultural adjustment from voluntary agencies. This is the phase we are in now. (TAC)

1C.008

Bernard, W. S. (1975). Refugee asylum in the United States: How the law was changed to admit displaced persons. *International Migration*, *13*, 3-20.

Refugee/Ethnic Group: European

When World War II ended there were some 12 million Displaced Persons (DP's) in Germany, people whom the Nazis had forcibly moved into Germany to serve as slave labor or to be imprisoned in concentration camps. About 11 million returned to their homelands, but 1 million had to be given asylum by the Allied countries, including the United States. United States immigration law was then so restrictive & discriminatory that few DP's could be admitted unless special legislation was passed. A number of religious, ethnic, labor, welfare, education, & social service organizations joined together in 1946 to form the Citizens Committee on Displaced Persons (CCDP), whose only purpose was to mobilize public opinion & bring pressure on Congress to pass legislation providing asylum for a fair share of the DP's. The CCDP raised over $1,000,000 & more than 250 other national organizations supported its cause & helped in its work. Major problems were public unawareness of the DP problem, some prejudice against DP's of various ethnic backgrounds, postwar hysteria & security phobia, & concern over DP's taking over jobs & scarce housing. In 1948 a bill was passed purporting to admit DP's; it was discriminatory & virtually unworkable & the CCDP fought to amend & improve it. In 1950 the law was changed so that eventually over 400,000 DP's were admitted to the United States without regard to the nationality quota limitations placed upon regular immigrants. This served as a precedent for the granting of asylum to later groups of refugees. Today, whenever the United States can effectively help in a particular refugee situation there is little or no difficulty. Major segments of the American public are more enlightened & the major faith groups have learned to work together in a common cause. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.009

Beyer, G. (1981). The political refugee: 35 years later. *International Migration Review*, *15*, 26-34.

Refugee/Ethnic Group: African; Asian; European

The refugee problem of the twentieth century is summarized, focusing on human & socioeconomic aspects of forced migrations before & after World War II & their causes. Political developments & "ethnic sorting" are found responsible for the massive proportions of the refugee phenomenon in the century. It is noted that entire complexes of peoples & nations are influenced by it, & that comprehensive political & economic solutions are the only meaningful response. International regard for human rights must be strengthened, & laws that constrain the acceptance of political refugees must be modified. European, African, & Asian forced migrations are outlined separately. It is suggested that cooperation between United Nations agencies - e.g., the Relief & Works Agency & the High Commissioner for Refugees - governmental, intergovernmental, & private aid organizations may be able to do something about the refugee problem. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.010

Citizens' Committee for Children of New York, Inc. (1980). *In search of safe haven: Foster care programs for unaccompanied minors in New York*. New York: Author.

Refugee/Ethnic Group: Southeast-Asian

Review of foster care programs for Indochinese unaccompanied minors in New York. Report consists of three parts: (1) description of federal refugee policy with emphasis on children and young people. (2) description of the resettlement program for refugee minors in New York State, and (3) results of interviews with forty-two Indochinese unaccompanied minors. Major recommendations to HEW and New York include the establishment of welcome centers in New York to receive and orient the newly arrived children, and more coordination between HEW and other federal and voluntary agencies to regulate the flow of children into the U.S. and to see that orientation and ESL classes begin for refugee children in the first asylum camps. Also included are appendices on the age, sex, religious preferences and ethnicity of the refugee children. (NIUCSEAS)

1C.011

Citizens' Committee for Children of New York, Inc. (1981). *Unaccompanied refugee minors: Policies and programs.* New York: Author.

Refugee/Ethnic Group: General; Southeast-Asian; Cuban; Haitian

This report examines the various policies that affect the rights of unaccompanied refugee children as defined by the Refugee Act of 1980. Included is a discussion of the appropriate interrelationship between the Federal, State and local governments and voluntary agencies in the establishment and funding of refugee programs and the appropriate response of the Federal government to unaccompanied children. These children are said to have the following rights: (1) preservation of ethnic identity; (2) access to family reunification; and (3) access to programs developed with the participation of the Federal government, voluntary agencies and the State and local governments. Also reported are the responsibilities and guidelines for programs administered by the Office of Refugee Resettlement, the adjustment problems of Indochinese, Cuban, and Haitian refugee children, and recommendations for general program guidelines and for foster care programs for unaccompanied minors. (NIUCSEAS)

1C.012

Cox, D. (1983). Refugee settlement in Australia: Review of an era. *International Migration, 21*, 332-344.

Refugee/Ethnic Group: General; Asian

Between 1975 & 1982, Australia took in almost 100,000 refugees, many of them Asians. The period saw the development of a formal refugee policy for the first time in Australia - a multicultural policy of settlement & integration - & the establishment of service programs for immigrants. From the perspective of a member of the Australian Refugee Advisory Council, refugee settlement in Australia during that period is discussed in terms of refugee selection & preparation, settlement procedures, counseling & information services, development of English-language programs for immigrants, employment issues, multicultural policies, & immigrant welfare. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.013

Etzioni, A. (1981). Refugee resettlement: The infighting in Washington. *The Public Interest, 65*, 15-29.

Refugee/Ethnic Group: Southeast-Asian, Cuban, Haitian

On the basis of personal experience as a White House adviser, the Carter administration's efforts to organize refugee services more effectively in the face of the massive influx of refugees from Southeast Asia in 1979 are traced. Initial suggestions called for an increased federal role; it was recommended instead that the federal government act only as a catalyst & convener, turning responsibility over to the private (voluntary) sector. Among the issues considered in trying to reconcile these views were: relationships between smaller voluntary agencies that traditionally had served refugees & large agencies that, while new to refugee resettlement, commanded greater resources; the questionable ability of even large agencies to provide sufficient funds & personnel to resettle such large numbers of refugees; & tensions between refugees & United States minorities, particularly over jobs & housing. The flood of Cuban & Haitian refugees in 1980 overtook the process of reorganization, & most of the resettlement work in 1979 & 1980 was handled, as it long had been, by a group of small voluntary agencies using federal funds. The question of the proper federal role remains unsettled, & the search continues for alternative approaches including greater private sector involvement. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.014

Finley, T. (1975). The permanent settlement of African refugees. *International Migration, 13*, 92-105.

Refugee/Ethnic Group: African

While African society traditionally had few barriers to migration, the Pan-African ideal has not yet been adopted by African governments. Within the existing system, three groups of refugees must be dealt with: (1) those from white minority-ruled countries, (2) those from countries under colonial rule, & (3) those from independent African states. Refugees from urban environments are more difficult to deal with than those from rural environments. A Convention for such problems was adopted in 1969 for Africa as a whole. African nations have for some time suffered both lack of skilled manpower & large populations of unemployed secondary school or college graduates. Secondary education of refugee groups is likely to be difficult to provide; some groups have helped matters by creating their own schools. Counseling facilities for refugees are needed to aid their adaptation to their new societies. A variety of efforts have been undertaken, but what is crucially needed is a greater degree of integration of efforts to aid refugees. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.015

Finnan, C. R. (1980). A community affair: Occupational assimilation of Vietnamese refugees. *Journal of Refugee Resettlement, 1*, 8-14.

Refugee/Ethnic Group: Vietnamese

Report on the occupational adjustment of Vietnamese refugees, conducted between October 1978 and April 1979 in Santa Clara County, south of San Francisco, California. Research focused on a group of Vietnamese adults enrolled in a six-month electronics technician training program and is based on participant observation, interviews and direct involvement of the researcher in the day-to-day activities of the people studied. Major findings of the study include (1) the importance of the refugee community member's occupational and psycho-social adjustment, (2) strong adaptability of the Vietnamese, and (3) strong interest in electronics as a field where rapid occupational adjustment is possible. (NIUCSEAS)

1C.016

Finnan, C. R. (1982). Community influences on the occupational adaptation of Vietnamese refugees. *Anthropological Quarterly, 55*, 161-169.

Refugee/Ethnic Group: Vietnamese

The economic integration of refugees is a primary goal of refugee resettlement policy. Most people encourage refugees to enter the labor market as quickly as possible, but few agree on the best route to employment. Some people encourage refugees to work immediately, taking any available job, while others counsel them to enroll in job training in hopes of starting with a better job. The occupational adaptation of Vietnamese refugees (number of cases not specified) in Santa Clara, Calif, to electronics technician jobs is described, focusing on the role of the refugee community in both shaping its members' job choices & helping them use their occupational attainment as a source of pride. Related suggestions are offered for refugee resettlement policy. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.017

Forsythe, D. P. (1983). The Palestine question: Dealing with a long-term refugee situation. *Annals of the American Academy of Political and Social Science, 467*, 89-101.

Refugee/Ethnic Group: Palestinian

The core of the post-1947 Palestine question has been transformed over time from a refugee question to one of self-determination. The process has been characterized by three stages: 1) a period in which Arab parties successfully resisted Israeli, Western, and U.N. efforts at Arab refugee resettlement; 2) a period in which violence by relatively independent Palestinian groups brought Palestinian claims of self-determination to the center of world diplomacy; and 3) a period lasting to the present in which Egypt, Israel, and the United States tried to resolve the Palestine question through the Camp David formula of Palestinian autonomy. The right of Palestinian self-determination has been recognized so widely and for so long that it is unlikely that peace in the Middle East can be obtained without the right's implementation in some meaningful form. Nevertheless Israel is justified in being skeptical about statements and claims by elements of the Palestine Liberation Organization regarding their satisfaction with a Palestinian state in the West Bank and Gaza areas. It is difficult to see, however, how the Israeli policy of settling the West Bank with Zionist zealots can contribute to a peaceful resolution of this vexing problem. Even though Palestinians have had success in transforming the international community's view of their situation, their ultimate success in implementing the recognized right to self-determination remains unclear. (POPLINE/AUTHOR)

1C.018
Foster, C. R. (1980). Creole in conflict. *Migration Today*, *8*, 8-13.

Refugee/Ethnic Group: General; Haitian

The author describes the impact of the 1968 Bilingual Education Act on Haitian refugees. There are two important concepts of this policy. First, minority children must learn and function in English. Second, the school should take the children with whatever native language ability they possess, teaching them the basics in their native language while instructing them in English until they ultimately can handle all instruction in English. The author goes on to describe a program held under the auspices of the Bilingual Education Program of the U. S. Department of Education focusing on Haitian Creole and the educational problems of children from the U. S. Haitian community. The impact of Creole and French languages in the Haitian society is described. (POPLINE/TAC)

1C.019
Goodwillie, S. (1984). Refugees in the developing world: A challenge to the international community. *ICMC Migration News*, *33*, 3-17.

Refugee/Ethnic Group: General

Traditional approaches to the provision of assistance to refugees are no longer sufficient as the problems confronting refugees are increasingly becoming more complex and difficult. The Office of the High Commissioner for Refugees, established by the United Nations in 1951, was created to provide international protection to refugees and to seek permanent solutions to their problems. This article discusses the relationship between refugees and developing countries, and the aims of and present arrangements for, international assistance to refugees in these countries. The areas in which these arrangements do not effectively meet the aims are also examined. (POPLINE/TAC)

1C.020
Grahl-Madsen, A. (1983). Identifying the world's refugees. *Annals of the American Academy of Political and Social Science*, *467*, 11-23.

Refugee/Ethnic Group: General

In a world in deep crisis, tendencies toward protectionism and xenophobia, as well as fear of new mass flows of asylum seekers, have brought the development of international instruments for the benefit of refugees to a virtual halt. The legal framework was formed during the 1950s and 1960s. There are several definitions of "refugee," serving different purposes, and there is a trend to interpret and apply them more narrowly. The term "economic refugee" is a misnomer. There are many categories of de facto refugees, the common denominator being that they should not be forcibly returned to their homeland. States employ different, often very crude methods to stem the tide of would-be refugees. More humane and equitable practices could be developed at negligible financial and political cost; so too could a low-keyed protocol on territorial asylum, making us aware of our responsibility as fellow human beings. (POPLINE/AUTHOR)

1C.021
Grognet, A. G. (1981). Refugees and the English language: A crucial interface. *Journal of Refugee Resettlement*, *1*, 43-50.

Refugee/Ethnic Group: General; Southeast-Asian

Reviews U.S. language policy as revealed by efforts made to assimilate immigrants in four historical periods. Studies kinds of instruction for new arrivals, specifically Indochinese refugees. (NIUCSEAS)

1C.022
Haines, D. W. (1982). Southeast Asian refugees in the United States: The interaction of kinship and public policy. *Anthropological Quarterly*, *55*, 170-181.

Refugee/Ethnic Group: Southeast-Asian

The formulation & implementation of federal refugee policy are conditioned by, & have pronounced effects on, the structures & relations of kinship among Southeast Asian refugees. This is particularly true of three core policy issues. First, the federal government is explicitly committed to facilitating the rapid economic self-sufficiency of refugees, & must therefore be cognizant of the ways in which this process is the function of joint strategies on the part of sets of kin, particularly those within a household. Second, the federal government has, or is considered to have, responsibility for the geographic & residential distribution of refugees within the United States. Any attempt to control or guide this distribution must inevitably confront the social, often kin-based, dynamics of initial resettlement, & subsequent, so-called secondary, migration of refugees. Third, the government has shown an increasing interest in the importance of ethnic communities & self-help organizations in the resettlement process, & must therefore possess an understanding of the kinds of kinship links that are core to such collectivities. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.023

Hansen, A. (1979). Managing refugees: Zambia's response to Angolan refugees 1966-1977. *Disasters, 3*, 375-380.

Refugee/Ethnic Group: African; Angolan

Discussed are the options of a host country in dealing with refugees, & the actions taken by the Zambian government to manage Angolan refugees between 1966 & 1976. Zambian President Kenneth Kaunda supported the Angolan war of liberation & allowed freedom fighters to establish base camps in Zambia; Kaunda's government also built refugee camps, attempting to control Angolan settlements & facilitate the eventual repatriation of refugees. However, field research undertaken in Angola between 1970 & 1972 shows that many Angolans tried to establish themselves in Zambia outside of government camps (ie, spontaneous resettlement) in border villages. While political vulnerability meant that many of these refugees could be exploited as a cheap labor source, this group as a whole achieved economic independence more quickly than the camp refugees. Attempts to repatriate refugees after the war have been only moderately successful, & government policy has recently become more flexible, giving Angolans the option of remaining permanently in agricultural settlements. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.024

Hayes, J., Heald, A., Magee, G., Chau, N., Rustin, B., Shearer, C., & Van Arsdale, P. W. (1980). Help for the Indochinese: How much is too much? *Public Welfare, 38*, 4-9, 59-64.

Refugee/Ethnic Group: Southeast-Asian

Series of responses to the following question posed by the *Public Welfare Journal*: "Are the Indochinese refugees getting more than their share of governmental assistance?" Responses are given by Jim Hayes, Ann Heald, Gail Magee, Nguyen Van Chau, Bayard Rustin, Colleen Shearer, and Peter Van Arsdale. Issues discussed include perceptions of discrimination by other minorities, refugees as responsibility of the federal government, the dangers of welfare dependence, and the importance of volunteerism. (NIUCSEAS)

1C.025
Heilman, M. J., & Surena, A. M. (1983). Migration into the United States: Perceptions of and responses to controlled and uncontrolled migration. *International Migration, 21*, 288-304.

Refugee/Ethnic Group: General

The history of migration into the United States is examined. The nature of migration has changed significantly, with most current immigrants coming from countries south of the United States, in the Western Hemisphere. Immigration into the U.S. has become nearly uncontrolled, and illegal immigration is a special problem. The Omnibus Immigration Control Act passed in 1981 attempts to prevent the influx of illegal aliens and to limit the number of legal immigrants. (POPLINE/TAC)

1C.026
Hohl, D. G. (1978). The Indochinese refugee: The evolution of United States policy. *International Migration Review, 12*, 128-132.

Refugee/Ethnic Group: Southeast-Asian

The plight of the Indochinese refugees is traced from 1975 to the present, & the legislation enacted to provide for the admission of refugees in numbers above the normal levels is disclosed. Other legislation, as well as activities of volunteer agencies & the United States Immigration Service, have been directed toward easing the adjustment of the Indochinese refugees. Considering the recent tragedy of the "boat people," further admissions of these refugees need to be authorized. Indications are that the Indochinese in this country want to work & to become financially self-sufficient. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.027
Hohl, D. G. (1980). The United States Refugee Act of 1980. *ICMC Migration News, 29*, 10-15.

Refugee/Ethnic Group: General

The development and implementation of the Refugee Act of 1980 is presented. This law defines refugees in a similiar manner to that of the United Nations High Commissioner for Refugees, but adds a category of persons who under special circumstances may be classified as refugees while still residing within the countries of their own nationality. The role of voluntary agencies in the refugee resettlement process, within the context of the federal government, is explained. The dilemma posed by the influx of 125,000 Cubans in April of 1980 is discussed. (POPLINE/TAC)

1C.028
Hohl, D. G. (1982). The Haitian boat people: Political or economic refugees? *ICMC Migration News*, *31*, 29-33.

Refugee/Ethnic Group: Haitian

This is an historical commentary on Haitian refugees between 1972 - 1982. The conditions in Haiti prior to the exodus are described. U.S. political policy toward Haitian refugees is detailed and policy changes occuring between 1972 and 1982 are discussed. (POPLINE/TAC)

1C.029
Immigrants, work, and welfare. (1985). *Focus*, *8*, 14-23.

Refugee/Ethnic Group: General

The purpose of this study is to examine the experience of immigrants in the U.S. labor force and their dependence on public welfare programs. The conclusions of the study challenge the results of previous research as well as prevailing views about the economic cost of immigration to the United States. (TAC)

1C.030
Kegley, C. W. (1984). The refugee asylum problem and world peace efforts. *International Journal of World Peace*, *1*, 45-52.

Refugee/Ethnic Group: General; Salvadorian

The problem of refugee asylum is seen to force decisions on ethical, political, legal, & economic grounds. Historically, the church, synagogue, & mosque have been recognized as the proper places of refuge for persons fleeing political & other persecution. The ethical grounds for this are statements in the Hebrew, Islamic, & Christian scriptures commanding the exercise of compassion & help for those in need. Exactly what this means in terms of offering asylum is differently interpreted, however, by the major churches. Discussed is whether it is legal to give asylum to people who have not obtained or have been denied political asylum. Civil disobedience is analyzed in this regard, & eight criteria are identified that justify its use in specific cases. It is hoped that United States foreign policy can be changed so that the granting of asylum will not lead to the murder of those who are deported or who escape. The case of Sana Chirino Amaya, a 24-year-old Salvadorian who had his head cut off when he returned, is a dramatic case in point. A Comment by Leonard W. Doob (Yale University, New Haven, Conn.) is provided. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.031
Kraus, R. (1983). Asylum seekers in the Federal Republic of Germany. Analysis of the situation--elements of a solution. *International Migration*, *21*, 230-237.

Refugee/Ethnic Group: European; German

The refugee situation in the Federal Republic of Germany (West Germany) is examined. The application process for asylum is discussed. There has been a tremendous growth in the number of asylum seekers in West Germany since World War II, which has placed much stress on the country's social-financial-educational institutions. Proposals have been made to limit the number of refugees granted asylum. (POPLINE/TAC)

1C.032
Kuepper, W. G., Lackey, G. L., & Swinerton, E. N. (1976). Ugandan Asian refugees: Resettlement center to community. *Community Development Journal*, *11*, 199-208.

Refugee/Ethnic Group: Asian; Ugandan

An interdisciplinary team, composed of a geographer, a political scientist, & a sociologist, has been evaluating the British response to Ugandan President Amin's 1972 forced emigration of Asians residing in Uganda. Although Britian accepted 30,000 refugees, the manner of dispersion continues to create problems for these refugees, raising the question as to whether some other means of reception could have been employed. The goal of the Ugandan Resettlement Board was, in retrospect, clearly not resettlement, but instead mere relocation, with little regard for the future of the refugees. Because of criticism of the government action, the board attempted to act quickly. Hence its goal was to relocate refugees quickly, & to do so while dispersing them so that highly visible subgroups would not develop. Thus refugees were dispersed & housing aid was available, but only in the form of locating housing. Because these refugees were either middle class or professional, the government should have risen above political expediency & offered more extensive help. Resettlement should have been the actual goal. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.033
Kweller, R. J., et al. (1975). Jobseeking for jobless refugees. *Manpower*, *7*, 20-23.

Refugee/Ethnic Group: Vietnamese; Cambodian

Federal and state employment service systems provided local job placement services for Vietnamese and Cambodian refugees in their temporary housing centers. Placements were generally at a lower skill level than refugee qualifications. Resettlement and job placement processes are described, and agencies involved are discussed. (NIUCSEAS)

1C.034
Liem, N. D. (1980). The resettlement of Vietnamese refugees. *Journal of Asian-Pacific and World Perspectives*, *4*, 39-50.

Refugee/Ethnic Group: Vietnamese

The massive and controversial movement of Indochinese refugees in recent years raises formidable pragmatic and ethical policy issues as well as critical intercultural problems. The plight of Vietnamese refugees living in the United States is explored. The circumstances surrounding their arrival, the influences of traditional values and structure on their national character, their status and mobility pattern in the United States, and the problems they face in a changing environment are discussed. There is a need for workable solutions to their problems of employment, health, housing, and interpersonal communication. An understanding of the psychological and cultural factors that affect the adjustment and adaptation of refugees to a new social milieu is needed. (SOCIAL WORK ABSTRACTS/AUTHOR/EDITED)

1C.035
Loiescher, G. D. & Scanlan, J. A. (Eds.). (1983). The global refugee problem: U.S. and world response. *The Annals of the American Academy of Political and Social Science*, *467*, 1-256.

Refugee/Ethnic Group: General

The series of forced and politically motivated migrations that started after World War II continues today. This issue contains articles that focus on policymaking and the legal and resettlement considerations involved in this permanent and growing problem. Issues such as the international ramifications of the Palestinian, Indochinese, and Cuban refugee problems are discusssed, as well as how various receiving countries are influenced by their own legal and administrative systems when trying to resettle refugees seeking asylum. (POPLINE/TAC)

1C.036

Marsh, R. E. (1980). Socioeconomic status of Indochinese refugees in the United States: Progress and problems. *Social Security Bulletin, 43*, 11-20.

Refugee/Ethnic Group: Southeast-Asian

The Social Security Administration is responsible for administering assistance programs not only to needy citizens but also to lawfully admitted aliens who require such aid. It therefore is interested in the economic situation of all the nation's inhabitants, including refugees. This article examines the status of one such group--the Indochinese refugees who came to this country following the fall of the South Vietnamese government in 1975. A series of sample surveys, commissioned by the Department of Health, Education, and Welfare, reveals that most members of the original group of 130,000 Indochinese had achieved a large measure of economic self-sufficiency by the end of 1978. In the fall of that year, however, a new wave of Indochinese refugees began emigrating to the United States. The latecomers--who now outnumber the original group--are generally poorer, less well educated, and less acclimated to urban living than were their predecessors. Such characteristics suggest higher future resettlement costs, which could well be exacerbated by the propensity of ethnic groups to cluster in a few areas. (MEDLINE/AUTHOR)

1C.037

McClellan, G. S. (Ed.). (1981). *Immigrants, refugees, and U.S. policy*. New York: The H. W. Wilson Company.

Refugee/Ethnic Group: General; Hispanic; Cuban; Haitian; Asian; Soviet; Jewish

Collection of essays and editorials which address the current refugee and immigrant problems. The book outlines the general problems resulting from the influx; raises specific issues related to the immigrant groups - their impact on the economy, the mistreatment of some, the barriers of diverse languages and cultures; and presents formulas that might provide humanitarian solutions. The first section is concerned with the general immigration picture. Section II deals with various migrant groups and enclaves: Hispanics, Chicanos, Miami as a

Latinized city, Cubans in New Jersey, Cape Verdeans in Mass., Haitians, Asians in New York City, Soviet Jews in Brooklyn, and the Los Angeles melting pot. Section III focuses on the cultural and educational implications of bilingualism. Section IV suggests possible future policies. (POPLINE/TAC)

1C.038
Moldofsky, N. (1975). Expellees and voluntary refugees from less-developed lands. *International Migration, 13*, 42-52.

Refugee/Ethnic Group: North-African; Jewish

Study is presented of the adjustment process of French-speaking, North African Jewish immigrants in Montreal--the 1st such substantial immigration to Canada from North Africa, admitted on humanitarian grounds at a time when geography formed Canada's primary admission criterion. This group, whose occupational content did not reflect the general occupational pattern of their native lands, defied geography as a selection criterion, adjusting in a manner that one would have expected from a limited, carefully selected group. As such, they evolved into being the kind of immigrants that are actively sought by Canadian immigration authorities. The viability of deliberate design in immigration comes into question in that the various areas of human endeavour cannot possibly be used as a criterion for prediction. When pertinent information happens to be widely dispersed among all individuals concerned & cannot possibly be known to any one particular individual or group, not even the most enlightened of policy-makers--however powerful politically, or well-equipped technologically--could possibly overcome this obstacle. Consequently, any controls emanating from policy making, necessarily operate with unknown & variable forces, also with time lags. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.039
Montero, D., & Dieppa, I. (1982). Resettling Vietnamese refugees: The service agency's role. *Social Work, 27*, 74-81.

Refugee/Ethnic Group: Vietnamese

Authors provide a brief review of the resettlement process and policies in the U.S., demographic background, and initial problems of the refugees. Follow-up national survey data indicated that by 1979 the refugees who arrived between 1975 and 1977 had relatively high levels of employment and income and low levels of case assistance--a clear move toward economic self-sufficiency. Authors recommended that practitioners work closely with Mutual Assistance Agencies to help design programs for these refugees who were psychologically unprepared to start a new life. (NIMH)

1C.040

Moon, A., & Tashima, N. (1982). *Help-seeking behavior and attitudes of Southeast Asian refugees.* San Francisco: Pacific Asian Mental Health Research Project.

Refugee/Ethnic Group: Southeast-Asian

Extensive report of a study on help-seeking behavior and attitudes of Southeast Asian refugees. Questionnaires were administered to 396 subjects in five California counties through personal interviews. Results and socio-demographic profiles of each ethnic group in the sample are illustrated in six tables. Data reveals that help-seeking practices differ for each ethnic group. Findings in five areas with concomitant policy implications are summarized as follows: 1) Sources of Help: For physical problems the majority (93%) go to external agents. For nonhealth related problems external agents are rarely solicited, self-reliance is common, and community is a consistent source for Lao and Mien. An implication of these findings is that the medical and mental health systems need to be coordinated. 2) Factors which influence choice of help: Confidence in service providers and cultural and linguistic similarities are most important and therefore the use of bilingual staff is recommended. 3) Expectations regarding assistance: Physical therapy and/or medicine/herbs are expected for physical problems, spiritual help for depression and isolation, and problem-solving approach for all other problems. 4) Differences between refugee help-seeking practices in U.S. and Southeast Asia: There is increased use of external agents for physical problems (93% vs 74%) in U.S., the family declines as a primary support and the community becomes more important as support. It is suggested that community agents be included on all policy making boards. 5) Refugees assessment of mental health problems: Resettlement-related problems such as English deficiency, unemployment, homesickness, housing finance, social isolation, lack of orientation to American customs, and loneliness are primary. Training and use of resettlement staff in mental health practices is recommended. (NIMH)

1C.041

Moos, F., & Morrison, C. S. (1981). The Vietnamese refugees at our doorstep: Political ambiguity and successful improvisation. *Policy Studies Review, 1*, 28-46.

Refugee/Ethnic Group: Vietnamese

In the spring of 1975, the United States was faced not only with military defeat in Vietnam, but also with the challenge of processing, caring for, & eventually resettling 130,000+ persons fleeing Vietnam. A case study is presented of operation "New Life," which evacuated these refugees & cared for them on Guam until they could be resettled. The account focuses on the logistic problems & pragmatic solutions reached in a situation where there existed a wide gap between public policy & its application. This discussion is especially instructive in light of the growing national & international problem of refugee relocation. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.042
Nguyen, V. H., & Atz, M. (1981). Tapping into the CETA program. *Journal of Refugee Resettlement, 1*, 43-49.

Refugee/Ethnic Group: General

Provides an overview of Department of Labor efforts for refugees. Explores ways that agencies serving refugees can enter the Comprehensive Employment and Training Act (CETA) system at the level of service delivery or policymaking. (NIUCSEAS)

1C.043
North, D. S. (1983). Impact of legal, illegal, and refugee migrations on U.S. social service programs. In M. M. Kritz (Ed.), *U.S. immigration and refugee policy: Global and domestic issues.* (pp. 269-285). Lexington, MA: Lexington Books.

Refugee/Ethnic Group: General

This chapter focuses on the impact that international migrants have on government-funded programs--in particular, income transfer, health, and education. Definitions are provided for legal and illegal, immigrants, refugees, and nonimmigrants. The differing demographic characteristics and differing program eligibiity requirements were found to make considerable difference in the outcome. (POPLINE/TAC)

1C.044
Oommen, T. K. (1982). Foreigners, refugees and outsiders in the Indian context. *Sociological Bulletin, 31*, 41-64.

Refugee/Ethnic Group: Indian; Punjabi

Socioeconomic tensions generated by the influx of non-native groups into India are discussed. While legal distinctions between foreigners, refugees, & "outsiders" (Indians from other districts) are recognized, it is noted that all three groups are often faced with similar problems & treatment in terms of either assimilation or retention of cultural identity. Historical events illustrating these problems are detailed, focusing on: (1) the 1947 partition of India based on religion; (2) the linguistic partition of Pakistan & the 1971 emergence of Bangladesh as a state; & (3) administrative reorganization of the Indian states using both linguistic & religious criteria. The economic "success" of Punjabi refugees despite numerous displacements is contrasted with the marginal situation of most uprooted Bengalis; fears of cultural identity loss among northeastern Indian groups, particularly the Assamese, are also examined. Issues of economic & linguistic dominance are analyzed in a review of post-1971 state reorganization & prospects for political mobilization among the immigrant & displaced groups. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.045
Palmieri, V. H. (1982). The refugees: What "Infighting"? *The Public Interest, 68*, 88-90.

Refugee/Ethnic Group: General

Amitai Etzioni (see ref. number IC.013) attributes rejection of his proposal to involve organizations such as United Way in refugee resettlement to political infighting based on a desire to maintain federal control of resettlement. This claim is criticized on the basis of personal experience as the administrator responsible for the decision. The proposal was poorly timed, given the political crises occurring when it was made, & was also inherently unworkable, given the lack of relevant experience on the part of general social service organizations. Further, efforts were made consistently to increase private sector support for specialized refugee resettlement agencies. In Federal "Involvement" of Voluntary Agencies, Amitai Etzioni notes that the proposal criticized was not to involve community-based social service organizations in resettlement, but to turn the entire effort over to them. Refugee resettlement at present is largely handled by private agencies. It seems plausible to regard it as an area that should have no federal involvement at all, & certainly no special federal program or administrative agency. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.046
Pisarowicz, J. A. (1980). Government policy and the dispersion of Indochinese refugees. In P. W. Van Arsdale & J. A. Pisarowicz (Eds.), *Processes of transition: Vietnamese in Colorado.* (pp. 23-41). Austin, TX: High Street Press.

Refugee/Ethnic Group: Vietnamese

Analysis of the geographical distribution of Vietnamese refugees in 1975 and 1976 with emphasis on the causes of secondary (i.e. post-arrival) migration. Data include both INS and HEW breakdowns by state. A series of regression analyses indicate that the primary factor in secondary migration is the magnet effect of existing Indochinese communities. Other significant factors are largely ones of ethnicity, such as positive correlations with the existing Filipino population and negative correlations with the existing Japanese population. Climate was uniformly found to be insignificant. (NIUCSEAS)

1C.047
Reimers, D. M. (1981). Post-World War II immigration to the United States: America's latest newcomers. *The Annals of the American Academy of Political and Social Science, 454*, 1-12.

Refugee/Ethnic Group: Southeast-Asian; European

During the 1920's, Congress drastically curtailed immigration from Europe and barred Asians. The Johnson-Reed Act of 1924 completed the restrictions and established the national origins system. After World War II, Congress reaffirmed that system with the enactment of the McCarran-Walter Act in 1952. But Congress also began to liberalize immigration policy, largely on a piecemeal basis. In 1965, Congress repealed the national origins quotas and restrictions against Asians and substituted a preference system based upon family unification, occupations, and refugee status. Still other changes in the 1970's modified the immigration laws further and permitted additional immigrants to enter. The changes in policy led to an increase in the number of immigrants arriving and also led to shifting patterns of immigration. Immigrants coming after 1945 were more apt to be refugees and to be of higher skills than before. And the majority were now female. From 1945 to 1965, most European immigrants were from northern and western European countries, but by the 1970's, southern and eastern European nations supplied the bulk of European immigrants to America. After 1965 another important shift was apparent: Third World nations replaced Europe as the major sending regions, and by the late 1970's, the vast majority of America's latest newcomers were from the Third World. (NIUCSEAS/AUTHOR)

1C.048
Rose, P. I. (1981). Links in a chain. *Migration Today, 9*, 6-23.

Refugee/Ethnic Group: Southeast-Asian

This article is a detailed description of the author's travels to several different Southeast Asian countries and his examination of the refugee resettlement process in the many centers and camps he visited. The goals and tasks of various organizations assisting in the resettlement process are discussed, with attention frequently focused on the individuals in key organizational positions. (POPLINE/TAC)

1C.049
Rose, P. I. (1984). The harbor masters: American politics and refugee policy. *Research in Social Problems and Public Policy, 3*, 312.

Refugee/Ethnic Group: General

The administrative & legislative handling of the plight of the refugee who reaches United States shores is recounted. The extent to which humanitarian goals fall short of realization because of considerations ranging from foreign policy to unofficial discriminatory practices based on petitioners' race & ethnicity is examined. Development of a sociology of exile is encouraged. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.050
Roucek, J. S. (1968). Refugees: As an American problem in its world-wide aspects. *Revista Internacional de Sociologia*, *26*, 115-138.

Refugee/Ethnic Group: General; Cuban

This paper gives a brief history of 20th century refugee movements, concentrating on the U.S. experience and its attempts, through legislation, to handle the refugee problem. The influx of Cuban exiles into Miami in the early 1960's has had significant social and economic impact on that area of the country. Unemployment among the refugees and American resentment of their presence are noted as negative effects of the influx. (TAC)

1C.051
Rubin, G. (1981). Language policy and the refugees. *Journal of Refugee Resettlement*, *1*, 59-63.

Refugee/Ethnic Group: General

In order to illustrate the impact that language has on an individual's sense of himself and of others, reviews research on speech patterns, literacy, and ethnic group relations. Urges the development of a rational language policy to deal with immigrants and refugees in the U.S. (NIUCSEAS)

1C.052
Sanders, J. (1981). The Mien of Alabama: A hill tribe clusters in the South. *Journal of Refugee Resettlement*, *1*, 27-30.

Refugee/Ethnic Group: Mien

The largest concentration of Mien in the eastern United States lives in Montgomery, Alabama. The author discusses sponsorship of a Mien family, their culture, and the process of developing necessary refugee resettlement services in the American South. (TAC)

1C.053

Scheinman, R. S. (1983). Refugees: Goodbye to the good old days. *Annals of the American Academy of Political and Social Science*, *467*, 78-88.

Refugee/Ethnic Group: General

The era of relative simplicity in refugee affairs has ended. Legal challenges, economic difficulties in the industrialized democracies, and the inability of some countries of first asylum to allow refugees to remain in their territories have contributed to a sense of crisis. This has come about because of confusion between refugees and economic migrants and a perception that greater numbers of people are on the move, in more uncontrollable ways, than ever before. Finally, economic and employment problems, which are themselves cyclical, lead to protectionist measures that can become fixed in law. To keep our commitments to genuine refugees and the system of protection and assistance that has evolved over 60 years of international cooperation, two things are needed. The first is to maintain the integrity of the definition of a refugee as it exists in international treaty and U.S. statute. The tendency to wish to extend those privileges to all unfortunate people is understandable, but will surely erode the special status reserved to victims of persecution. The second is to design joint resettlement and development projects that can benefit a broader class of displaced persons. This will relieve population pressures on first-asylum countries; avoid eligibility determinations that sometimes result in stark life-and-death choices; and, by helping development, also contribute to ameliorating some of the root causes of forced migration. (POPLINE/AUTHOR)

1C.054

Schey, P. A. (1981). The black boat people founder on the shoals of U.S. policy. *Migration Today*, *9*, 6-10.

Refugee/Ethnic Group: Haitian

This article is an expanded version of one originally published in the Los Angeles Times in 1980, addressing the plight of Haitian refugees. U.S. support for the Duvalier regime has interfered with this country's implementation of an equitable human rights policy. The U.S. has been more willing to accept refugees fleeing from countries with newly established communist governments than those escaping a right-wing dictatorship. This policy has included the interception by Coast Guard cutters of boats carrying the escaping refugees, with subsequent deportation back to Haiti and certain reprisals. (POPLINE/TAC)

1C.055

Schmidt, A. (1981). Refugees and immigrants: In conflict with the American poor? *Migration Today*, *9*, 17-21.

Refugee/Ethnic Group: General; Mexican

Citing several studies, primarily of Mexican-American migration, the author argues against the commonly held beliefs that immigrants take jobs away from native-born Americans and place a heavy burden on social service programs. The author emphasizes that efforts need to be made to rid this country of poverty and provide the native poor with help to move up and out of unskilled jobs. (POPLINE/TAC)

1C.056
Schroeder, M. (1981). The Cuban refugee crisis of 1980: Challenge and response. *ICMC Migration News*, *30*, 21-25.

Refugee/Ethnic Group: Cuban

This article discusses the impact of the Cuban influx of 1980 on American immigration authorities. The creation of a new admissions category, Cuban-Haitian entrant, resolved some of the dilemmas posed by the classification limitations. The role of the Migration and Refugee Services office of the United States Catholic Conference (MRS/USCC) in the resettlement of the new entrants is presented. Also discussed is the fate of those entrants classified as potentially dangerous criminals. (POPLINE/TAC)

1C.057
Smith, R. F. (1966). Refugees. *The Annals of the American Academy of Political and Social Science*, *367*, 43-52.

Refugee/Ethnic Group: General

Almost one-fifth of all immigrants to the U.S. since 1945 have been refugees. Despite the lack of a national policy, they have been admitted by a bewildering array of directives and special laws. The refugees came from widely varying ethnic backgrounds and experiences. They ranged from Latvians to Chinese to Cubans. In spite of their diversity, the refugees shared a common desire to find a land where they could rebuild their interrupted lives. They all faced the task of overcoming the same obstacles to integration in their adopted countries. The major hurdles were to learn English, find appropriate employment, and control their bittersweet nostalgia for the land of their birth. The refugees came voluntarily and were helped by the voluntary efforts of the major national resettlement agencies and their constituents. In brief, the resettlement of these refugees represents an outstanding example of the willingness of Americans not only to accept but to assist newcomers regardless of their racial, ethnic, or religious background. (COPYRIGHT SOCIOLOGICAL ABSTRACT, INC.)

1C.058
Smither, R. (1980). American ambivalence toward refugees. *Migration Today, 8*, 20-24.

Refugee/Ethnic Group: General; Cuban; Hungarian

The United States has been clearly selective in the refugee groups to which it has chosen to provide assistance. This paper gives an historical picture of immigration into this country, contrasting the concept of America as the "melting pot" as represented by the Statue of Liberty with the actual practice of exclusion of certain nationalities of people for racial or religious reasons. (POPLINE/TAC)

1C.059
Solberg, M. (1982). El Salvador. *Migration Today, 10*, 6-12.

Refugee/Ethnic Group: Salvadorian

This article gives a brief political history of El Salvador and describes the plight of the Salvadorian refugee. One-fifth of the population of El Salvador has become refugees--either as displaced persons within their own country or seeking refuge in other Central American countries. The author takes issue with the enforcement of U.S. immigration policy as related to the refugees: most of these people are termed "economic migrants" and, therefore, are not entitled to refugee status or political asylum in the U. S. (POPLINE/TAC)

1C.060
Stein, B. N. (1981). Understanding the refugee experience: Foundations of a better resettlement system. *Journal of Refugee Resettlement, 1*, 62-71.

Refugee/Ethnic Group: Southeast-Asian; Soviet; Jewish

Suggests the need for understanding refugees' characteristics, experiences, resettlement needs, and their patterns of behavior during the resettlement process. Examines consistencies which have been observed in refugee experiences and the process of adaptation to a new society. Treats specifically the conditions of Soviet Jewish and Indochinese refugees. (NIUCSEAS)

1C.061
Stein, B. N. (1983). The commitment to refugee resettlement. *Annals of the American Academy of Political and Social Science, 467*, 187-201.

Refugee/Ethnic Group: General

Since 1975 the traditional refugee receiving countries have made major changes in their refugee resettlement programs and policies. They have institutionalized their refugee programs, increased the number of refugees accepted for resettlement, and broadened the range of groups that can be considered for resettlement by relying on the U.N. Convention definition of a refugee as their criterion for acceptance. Recently concern has increased about the costs and difficulties of resettlement, particularly of third-world refugees. This has led some observers to wonder if there is a diminished commitment to resettlement as a durable solution. This article concludes that if one uses 1975 as a base year for comparison, commitment to refugee resettlement has increased significantly. There are, however, present challenges to it. The numbers of refugees being resettled are dropping sharply in response to both decreased need and increased domestic pressures within the major receiving nations to limit admissions. Lower numbers by themselves are an inadequate indicator of a decreased long-term commitment to resettlement. The article suggests a range of factors to be considered in assessing this commitment. (POPLINE/AUTHOR)

1C.062
Stern, L. M. (1981). Response to Vietnamese refugees: Surveys of public opinion. *Social Work*, *26*, 306-311.

Refugee/Ethnic Group: Vietnamese

Public opposition to the resettlement of South Vietnamese refugees in the United States was initially regarded as a departure from an enduring humanitarian tradition of maintaining an "open door" to immigrants. However, the author's comparison of public opinion polls concerning the 1975 Vietnamese refugees with surveys about the waves of refugees coming to this country after World War II reveals a persistent reluctance among the majority of the population to support liberal immigration policies. (NIUCSEAS)

1C.063
Strand, P. J. (1984). Employment predictors among Indochinese refugees. *International Migration Review*, *18*, 50-64.

Refugee/Ethnic Group: Vietnamese; Hmong; Lao; Cambodian; Southeast-Asian

The influx of Indochinese refugees into the United States since 1975 has forced policy development in various resettlement areas, with considerable emphasis placed on employment & employment barriers. Here, an investigation of refugee employment is reported, part of a larger San Diego, Calif, interview study (number of cases = 800 household heads) of Indochinese refugees' resettlement experiences. A multivariate model was used to distinguish the effects of 16 predictor variables, categorized as: (1) facilitating/program variables (eg, utilization of job training & placement programs), (2) enabling variables (eg, health, language skills, length of United States residence, transportation), (3) predisposing variables (eg, age, education in home country, gender), & (4) ethnicity (Vietnamese, Laotian, Hmong, & Cambodian). The results indicate that English language communication skill is the major factor in refugee employment. Health & transportation are also important, but vary in impact by ethnic group. However, prearrival education, gender, & age do not predict employment status. The results are encouraging because they reveal little effect of background variables (eg, culture, education, job experience) on ability to achieve self-sufficiency, while the influential variables of language facility, health, & transportation are quite amenable to policy influence. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.064
Svahn, J. (1975). Resettling Vietnam refugees. *Social and Rehabilitation Record*, *2*, 24-27.

Refugee/Ethnic Group: Vietnamese

This article discusses the initial response by the United States government to the resettlement needs of Southeast Asian refugees. The roles of the voluntary agencies assisting in resettlement and refugee "sponsors" are described. (NIUCSEAS)

1C.065
Tenhula, J. D. (1979). Realities and responsibilities: Refugee resettlement in the U.S. *Migration Today*, *7*, 9-13.

Refugee/Ethnic Group: General

This article provides a brief history of refugee resettlement in the U.S., noting the ethnic differences between immigrants pre- and post 1900 and post 1960. Other issues examined include: the existing government laws and regulations which assist or impede resettlement, "The Refugee Act of 1979" and its potential effects, the role of voluntary agencies in resettlement and how they work with the government, and the response of the American public to refugee resettlement. (NIUCSEAS/TAC)

1C.066
Thomas, P. (1981). Indochinese in France and the U.S.: Public policy and the dynamics of secondary migration. *Journal of Refugee Resettlement*, *1*, 15-21.

Refugee/Ethnic Group: Southeast-Asian

Comparison of French and U.S. policy toward Indochinese refugees with emphasis on the issue of secondary migration. Author notes the similarities in basic governmental goals, but also the differences in the implementation of specific policies. The French, for example, are both more directive about the need for assimilation and more tolerant of social diversity. In both countries, however, secondary migration is very extensive. Author suggests that secondary migration is the process by which employment, appropriate housing, and relevant kin are brought into balance. (NIUCSEAS)

1C.067
Tillema, R. G. (1981). Starting over in a new land: Resettling a refugee family. *Public Welfare*, *39*, 35-41.

Refugee/Ethnic Group: Hmong

Informal review of one Wisconsin congregation's experience in sponsoring a five-member Hmong family who had already spent five years in a refugee camp in Southeast Asia. Author describes initial health problems, cultural conflicts over medical practices, problems in dealing with social service agencies, congregational resources, and educational issues. Major recommendations involve the utility of explicit service plans and the need to coordinate a wide variety of public and private resources. (NIUCSEAS)

1C.068
Tropin, R. (1981). Sponsorship: A bridge of hope. *Journal of Refugee Resettlement*, *1*, 3-5.

Refugee/Ethnic Group: General

This article presents a brief discussion of the various voluntary agencies, all belonging to the American Council of Voluntary Agencies (ACVA), which are active in refugee resettlement. The role of a sponsor and the mechanics of sponsorship are discussed. (NIUCSEAS/TAC)

1C.069
Van Esterik, P. (1981). In-home sponsorship for Southeast Asian refugees. *Journal of Refugee Resettlement*, *1*, 18-26.

Refugee/Ethnic Group: Southeast-Asian

This article explores the meaning of sponsorship and the role of private in-home sponsorship in the adjustment of Southeast Asian refugees. The sponsor-refugee relationship is examined within a conceptual framework through the use of several analogies; some common sponsorship problems are identified. Sponsorship is also examined as a process, divided into the five stages of formal commitment, in loco parentis, patron, culture broker, and disengagement. (NIUCSEAS/TAC)

1C.070
Veidemanis, J. (1964). Applied sociology and the refugee problem. *Indian Journal of Social Research*, *5*, 74-82.

Refugee/Ethnic Group: European

This paper analyses the operations of the Allied DP/refugee agencies after World War II in caring for and resettling refugees in West Germany and Austria. Discussion is included on how initally to handle a refugee influx, and how to resettle and/or assimilate refugee groups. In the Allied operations, shortcomings resulted particularly from failure to understand the cultural/historical background of exile groups. This should enable future planners to avoid such shortcomings and select qualified personnel, develop leadership, and proceed collaboratively and experimentally and thus treat the problem on more scientific lines. (TAC/AUTHOR)

1C.071
Wenk, M. (1968). The refugee: A search for clarification. *International Migration Review*, *2*, 62-68.

Refugee/Ethnic Group: General

Various definitions of the term "refugee" are examined and compared to draw distinctions between the refugee and the "escapee," the "expellee," and the "victim of hostilities." The responsibilities of the United Nations for each of these groups are discussed. (TAC)

1C.072
Whelan, F. G. (1983). Principles of U.S. immigration policy. *University of Pittsburgh Law Review*, *44*, 447-484.

Refugee/Ethnic Group: General

This paper reviews and offers some reflections on the principles that have guided U. S. immigration (including refugee) policy in the recent past, and that may guide it in the future. Three principles offered by the Select Commission on Immigration and Refugee Policy and Professor Fuchs, the executive director, are discussed. These three principles are the rule of law, the open society, and international cooperation. (POPLINE/TAC)

1C.073
Winter, R. P. (1980). Refugee resettlement: A public/private effort. *Journal of Refugee Resettlement, 1*, 4-6.

Refugee/Ethnic Group: General

This article discusses the interrelationship of the governmental agency, Office of Refugee Resettlement (ORR), and the many private agencies and organizations which have worked toward successful resettlement of Southeast Asian refugees in the U. S. (TAC)

1C.074
Woon, Y. F. (1984). Indo-Chinese refugee sponsorship: The case of Victoria, 1979-1980. *Canadian Ethnic Studies/Etudes Ethniques au Canada, 16*, 58-77.

Refugee/Ethnic Group: Southeast-Asian

In-depth interviews of Indo-Chinese sponsorship group leaders (number of cases = 25) in Victoria, British Columbia, indicate that a majority came from former refugee & immigrant families & now subscribe to multicultural ideals. Because of their background, despite the cultural gap, many were tolerant of & sympathetic to the refugees arriving in 1979/80. Though they tended to be possessive, many derived intrinsic satisfaction from being instrumentally helpful. They found private sponsorship a mind-widening experience. However, discouraged by some refugees who tried to milk the system, & having to answer to congregations with mixed reactions to the sponsorship program, many leaders affiliated with religious groups were reluctant to responsor. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1C.075
Wright, R. G. (1981). Voluntary agencies and the resettlement of refugees. *International Migration Review, 15*, 157-174.

Refugee/Ethnic Group: Southeast-Asian; General

Review of the role of the voluntary agencies in resettling refugees, with emphasis on the Indochinese in the United States. Author discusses the following topics: (1) history of the voluntary agency involvement with refugees, (2) voluntary agency-government relations, (3) objectives of resettlement, (4) the rising role of the federal government, (5) matching grant programs, (6) overseas voluntary agency responsibilities, (7) pre- and post-arrival processing and services, (8) difficulties in the planning process, (9) placement strategies and their effects on secondary migration, (10) the need for orientation, and (11) unaccompanied minors. Author concludes by stressing the benefits of voluntary agency involvement in refugee resettlement. (NIUCSEAS)

1C.076
Young, S. B. (1983). Who is a refugee? A theory of persecution. In L. F. Tomasi (Ed.), *In defense of the alien, v. 5: Refugees and territorial asylum.* (pp. 38-52). Staten Island, NY: Center for Migration Studies.

Refugee/Ethnic Group: Haitian; Mexican; Vietnamese; General

The chapter explores, from a legal perspective, the differences in interpretation of the definitions of immigrant versus refugee. Fear of persecution, a key concept in determining refugee status, is also viewed as an indictment of the regime which has been abandoned. The author argues for a wider interpretation of the category of those able to claim refugee status. (POPLINE/TAC)

1C.077
Zucker, N. L. (1983). Refugee resettlement in the United States: Policy and problems. *Annals of the American Academy of Political and Social Science, 467*, 172-186.

Refugee/Ethnic Group: General

Federal refugee resettlement policies and programs, like admission policy, developed in an ad hoc, reactive way. Federal involvement in resettlement started out modestly as aid to Cubans, grew enormously with aid to the Indochinese, and continued to grow even more with a catchall program for Soviet and other refugees. Over the years, the private nonprofit voluntary agencies became institutionalized as the private-sector link between admissions and local resettlement. The Refugee Act of 1980 was an attempt to design a coherent and comprehensive refugee resettlement policy. The act will have to be periodically considered for reauthorization, and it is clear that while the goal of successful economic and social integration of the refugee into American society is universally agreed upon, the modes of resettlement are controversial. Resettlement problems for policymakers, host communities, and refugees remain. (POPLINE/AUTHOR)

The following references (identified by their bibliography number) also contain some information relevant to category **1C:**

1A.009, 1A.029, 1A.037, 1A.052

1B.007, 1B.009, 1B.010, 1B.011, 1B.015, 1B.016, 1B.020, 1B.026, 1B.028, 1B.031, 1B.033

1D.044, 1D.045, 1D.052, 1D.059

1E.003, 1E.004, 1E.005, 1E.009, 1E.010, 1E.011, 1E.016, 1E.023, 1E.025, 1E.031, 1E.034, 1E.035, 1E.039, 1E.044, 1E.046

2A.003, 2A.020, 2A.024, 2A.061, 2A.062, 2A.064

2C.003

2E.018

2F.003, 2F.011, 2F.016, 2F.026

2G.015

3A.005, 3A.024, 3A.025, 3A.026, 3A.033, 3A.034, 3A.050, 3A.051, 3A.052, 3A.056

3B.001, 3B.008, 3B.010

3D.002, 3D.010

4.011, 4.013

The reader is advised to refer to the above references for more information regarding **Policy Issues**.

1D. Physical Health and Medical Care ...

1D.001
August, L. K. (1984). Southeast Asian refugees of Rhode Island: A demographic and health profile. *Rhode Island Medical Journal, 67*, 313-317.

Refugee/Ethnic Group: Cambodian

Includes statistics about the Southeast Asian population in Rhode Island. Cambodians constitute the largest Southeast Asian ethnic group there. (CB-SARS)

1D.002
Barclay, W. R. (1979). Indochinese refugees [editorial]. *Journal of the American Medical Association, 242*, 2327.

Refugee/Ethnic Group: Southeast-Asian; Vietnamese

This letter-to-the-editor alerts physicians to potential special health problems incoming refugees may have. (MEDLINE/TAC)

1D.003
Baron, R. C., Thacker, S. B., Gorelkin, L., Vernon, A. A., Taylor, W. R., & Choi, K. (1983). Sudden death among Southeast Asian refugees. An unexplained nocturnal phenomenon. *Journal of the American Medical Association, 250*, 2947-2951.

Refugee/Ethnic Group: Southeast-Asian; Cambodian; Lao

In the period July 15, 1977, through March 30, 1982, there were at least 51 sudden, unexplained deaths in the United States among refugees from Southeast Asia. These deaths involved relatively young (median age, 33 years), previously healthy persons. All except one were male, and all died at night. Available data from studies among young adults in this country suggest that this specific phenomenon has an unusually high incidence among Laotian and Kampuchean refugees and, furthermore, has not previously been observed in the United States. Interviews with families of the decedents and a case-control study have failed to establish causal factors, but emotional stress cannot be ruled out as a contributing element. While reviews of the forensic investigations have confirmed the absence of important common pathological or toxicological findings, preliminary findings of special postmortem cardiac studies, now in progress, suggest that at least some of these deaths may be associated with developmentally abnormal conduction system pathways. Further studies are required to confirm this association, to define the apparently sleep-induced mechanism that triggers these deaths, and to explain the male preponderance in this disorder. (MEDLINE/AUTHOR)

1D.004
Barry, M., Craft, J., Coleman, D., Coulter, H. O., & Horwitz, R. (1983). Clinical findings in Southeast Asian refugees. *Journal of the American Medical Association, 249*, 3200-3203.

Refugee/Ethnic Group: Southeast-Asian

Since 1979, we have provided comprehensive medical care to a group of 142 Southeast Asian refugees who relocated in Connecticut. In this group, we identified clinically important issues in child development. As plotted on standard growth curves, 47% of refugee children were below the fifth percentile in height for age and 22% were below the fifth percentile in weight for height. Although these children are potentially at increased risk for nutrition-related health problems, our clinical assessment did not confirm malnutrition. We also confirm a high prevalence of intestinal parasitism (59%), positive tuberculin test results (40%), and hepatitis B antigenemia (16%), as observed previously by health authorities. We conclude that anthropometry should not replace a clinical nutritional assessment of refugee children. (MEDLINE/AUTHOR)

1D.005
Bollag, U. (1980). Practical evaluation of a pilot immunization campaign against typhoid fever in a Cambodian refugee camp. *International Journal of Epidemiology, 9*, 121-122.

Refugee/Ethnic Group: Cambodian

An outbreak of typhoid fever in the largest refugee camp of the besieged capital of Phnom-Penh, Cambodia, and availability of a locally manufactured Anti-Tetanus-Typhoid-Paratyphoid vaccine prompted us to test the practicability of a mass immunization campaign by carrying out a trial in the smaller, well delineated refugee camp of Pochentong. Initial acceptance was good, due to a comprehensive service (information, health education and individual care of patients). Attendances by adults and children showed a steady decline with only 20% completing the course. It is concluded that multiinjection immunization campaigns against typhoid-paratyphoid are a waste of money in a war-torn situation with an unstable population. (MEDLINE/AUTHOR)

1D.006
Breitenbucher, R. B. (1980). Indochinese refugees -- medical care of Southeast Asians -- compliance. *Minnesota Medicine, 63*, 41-44 .

Refugee/Ethnic Group: Southeast-Asian

A discussion of universal problems of compliance with a few comments related specifically to SE Asians. Issues and problems identified are trust in physician and regimen, cost and transportation factors, patient's ability to understand and remember regimen, toxic effects of medication, patient attitude toward illness, and patient's concept of physiology and disease processes. (MEDLINE/TAC)

1D.007
Coakley, T. A., Ehrlich, P. R., & Hurd, E. (1980). Health screening in a family clinic. *American Journal of Nursing, November*, 2032-2035.

Refugee/Ethnic Group: Southeast-Asian

Authors, associated with the Family Clinic of the Montgomery County (Maryland) Department of Health, describe its work with Southeast Asian refugees. (NIUCSEAS)

1D.008
Dean, A. G. (1979). Suggestions for medical screening of Southeast Asian refugees. *Minnesota Medicine, 62*, 754-755.

Refugee/Ethnic Group: Hmong

Article contains suggestions for physicians caring for newly arrived Southeast Asian refugees. In addition to the general medical examination, screening for tuberculosis and intestinal parasites should be conducted. Physicians should not assume that complete immunization status has been achieved. (HB-SARS/TAC)

1D.009
Del Bueno, D. J. (Ed.). (1980-1981). Indochina moves to Main Street. *RN*, 43-44.

Refugee/Ethnic Group: Southeast-Asian

Six separate series articles for nursing personnel on working with Southeast Asian patients are included. Topics covered are exotic diseases, childbearing, children, communication, and culture. (NIUCSEAS/TAC)

1D.010
Dick, B. (1984). Diseases of refugees--causes, effects and control. *Transactions of the Royal Society of Tropical Medicine and Hygiene, 78*, 734-741.

Refugee/Ethnic Group: General

The effects of migration on the health/disease status of various refugee populations are examined. Three groups are affected: the refugees themselves, the host community, and those left behind in the country of origin. There is a need to recognize the similarities between the health and disease problems of different refugee groups so that common approaches to appropriate relief responses can be developed. (MEDLINE/TAC)

1D.011

Downs, C. R. (1983). Physicians help themselves by helping refugee families. *Michigan Medicine*, *82*, 73, 75.

Refugee/Ethnic Group: Vietnamese; General

Some of the common issues for physicians dealing with cross-cultural patients are outlined. (MEDLINE/TAC)

1D.012

Eckensberger, D., Overbeck, G., & Biebl, W. (1976). Subgroups of peptic ulcer patients. *Journal of Psychosomatic Research*, *20*, 489-499.

Refugee/Ethnic Group: General

This paper is a discussion of the psychosomatic concepts of peptic ulcer diagnosis. A total of 86 patients who had been referred preoperatively from the Surgical University Clinic in Marburg, West Germany, to the Psychosomatic University Clinic at Giessen, were interviewed and studied according to their social characteristics and illness behaviors, psychological testing, and psychoanalytical analyses. Of the total number studied, seven subgroups were formed based on correlations of characteristics; two of these subgroups are refugees and displaced persons. The subgroups are also discussed as to how they relate to the psychodynamics of: the general performance effort, the oral dependence-independence conflict, and the object loss. (MEDLINE/TAC)

1D.013

Eckert, W. G. (1981). Unexplained deaths in refugees newly arrived in America. *American Journal of Forensic Medicine and Pathology*, *2*, 185-186.

Refugee/Ethnic Group: General

The author surveys various possible causes of deaths which medical investigators may be unable to explain. These include lack of immunity to diseases uncommon in the U.S., use of plant poisons, dietary and cooking habits, and accidents resulting from unfamiliarity with U.S. products. (MEDLINE/TAC)

1D.014
Edwards, K. S. (1980). A different welcome. *Ohio State Medical Journal*, *76*, 495-498.

Refugee/Ethnic Group: Cuban

A physician who emigrated from Cuba in 1957 describes his experiences volunteering in a Cuban refugee camp in Florida. Most frequent medical problems treated were asthma, upper respiratory infection and diabetes. Sixteen percent of hospital admissions in the first two weeks of camp were psychiatric disorders. (MEDLINE/TAC)

1D.015
Erickson, R. V., & Hoang, G. N. (1980). Health problems among Indochinese refugees. *American Journal of Public Health*, *70*, 1003-1006.

Refugee/Ethnic Group: Southeast-Asian

The results of medical evaluations of 194 Indochinese refugees at the University of Connecticut Burgdorf Clinic in Hartford are reported. In addition to confirming findings of other studies of these refugees, the authors found a significant prevalence of abnormalities, i.e., hematological (37 per cent), dermatological (26 per cent), psychiatric (10 per cent of adults), and thyroid (5 per cent). Guidelines and recommendations of physicians providing medical care for Indochinese refugees are presented. (NIUCSEAS)

1D.016
Feldstein, B., & Weiss R. (1982). Cambodian disaster relief: Refugee camp medical care. *American Journal of Public Health*, *72*, 589-594.

Refugee/Ethnic Group: Cambodian

A report on the pediatrics ward in the refugee camp Khao I Dang, where the authors worked for three months. They describe the hospital facilities and the medical problems their patients suffered from, and discuss the need for "epidemiological information, laboratory facilities, treatment protocols and supplies, and disease prevention." (CB-SARS)

1D.017
Finck, J. (1984). Southeast Asian refugees of Rhode Island: Cross-cultural issues in medical care. *Rhode Island Medical Journal*, *67*, 319-321.

Refugee/Ethnic Group: Southeast-Asian

The author describes concerns about four medical practices frequently feared or misunderstood by Southeast Asians for socio-cultural reasons: 1) blood drawing, 2) medications, 3) surgery, and 4) autopsies. (MEDLINE/TAC)

1D.018
Floriani, C. M. (1980). Southeast Asian refugees: Life in a camp. *American Journal of Nursing*, 2028-2030.

Refugee/Ethnic Group: Southeast-Asian; Thai

The article, written in diary form, records the author's impressions and experiences during one month working as an RN in a refugee camp in Thailand. (TAC)

1D.019
Gaydos, J. C., Mino, T. A., Ashmore, L. E., Bertsch, M. L., McNeil, T. J., & Eisen, B. (1978). A preventive medicine team in a refugee relief operation - Fort Chaffee Indochina refugee camp (April-July 1975). *Military Medicine*, *143*, 318-321.

Refugee/Ethnic Group: Southeast-Asian

Paper summarizes the activities of a preventive medicine team sent to the Fort Chaffee Indochina Refugee camp to develop and implement public health and preventive medicine programs, and to advise on matters of public health importance. Initial surveys of the environment and of the operation, as well as actions and programs are explained. (NIUCSEAS)

1D.020
Goldfield, N., & Lee, W. (1982). Caring for Indochinese refugees. *American Family Physician*, *26*, 157-160.

Refugee/Ethnic Group: Southeast-Asian

A refugee camp in Hong Kong and a health center in Los Angeles provide data on patterns of health care among Indochinese refugees. American physicians need to be aware that incoming refugees use both Western and traditional Chinese models of medical care. In addition, they are subject to special psychologic problems resulting from their past ordeals and their resettlement in a different country. Increased emergency aid should be provided to geographic areas with large concentrations of refugees. (MEDLINE/AUTHOR)

1D.021
Gordon, V. C. (1982). Culturally sensitive nursing care for Indochinese refugees. In N. Tsuchida (Ed.), *Asian and Pacific American experiences: Women's perspectives.* (pp. 206-215). Minneapolis: Asian/Pacific American Learning Resource Center, University of Minnesota.

Refugee/Ethnic Group: Southeast-Asian

This is a comprehensive article that discusses resettlement issues, common health problems, cultural differences, and adjustment needs, as well as nursing implications. The section on nursing care includes first contact issues, interpersonal differences, children, women, and family problems. The author concludes with a brief description of recent research and some further implications for nurses working with Southeast Asian families. (HB-SARS/TAC)

1D.022
Grizzell, S., Savale, J., Scott, P., & Tuong, N. (1980). Indochinese refugees have vastly different views and use of medical care system. *Michigan Medicine, 79*, 624-628.

Refugee/Ethnic Group: Southeast-Asian

This article describes some of the barriers which need to be bridged as a result of the refugees' past experience with medical treatment and their health beliefs. Tendency to self-medicate, inability to give thorough medical history, somatization of symptoms, modesty, and expectation of immediate relief are specific barriers discussed. (MEDLINE/TAC)

1D.023
Hoang, G. N., & Erickson, R. V. (1982). Guidelines for providing medical care to Southeast Asian refugees. *Journal of the American Medical Association, 248*, 710-714.

Refugee/Ethnic Group: Southeast-Asian

Almost 500,000 Southeast Asian refugees have arrived in the United States since 1975. While these refugees have not presented substantial public health problems, they have important personal health problems frequently requiring medical attention. Medical care providers in this country need to be aware of disease patterns and prevalence among these refugees. As well, they need to be aware of the cultural and religious backgrounds and previous medical practices of this refugee population, particularly as these practices influence the refugees' ability to obtain and maintain medical services provided in this country. Historical, cultural, religious, ethical, and medical information is provided to help US health care facilities develop culturally appropriate medical care services for Southeast Asian refugees. (MEDLINE/AUTHOR)

1D.024
Hoang, G. N., & Erickson, R. V. (1985). Cultural barriers to effective medical care among Indochinese patients. *Annual Review of Medicine, 36*, 229-239.

Refugee/Ethnic Group: Southeast-Asian

Since 1975, over 600,000 Indochinese refugees have resettled in the United States. This patient population has significant personal health problems in need of medical treatment. However, Indochinese refugees frequently underutilize existing health care services. This, in part, results from major cultural barriers between patient and provider. A review is provided of the history of the recent Indochinese immigration and the cultural traits, religious beliefs, and health care practices of this refugee population. This information is provided in the hope that health care providers will learn to understand the Indochinese refugee as a patient and reduce those cultural barriers that appear to limit their access to medical care in this country. (MEDLINE/AUTHOR)

1D.025
Holck, S. E., & Cates, W., Jr. (1982). Fertility and population dynamics in two Kampuchean refugee camps. *Studies in Family Planning, 13*, 118-124.

Refugee/Ethnic Group: Cambodian

This study describes the fertility levels among two Khmer refugee populations arriving in Thailand in 1979, and discusses the differences in the health conditions of the two groups as related to the observed fertility differences. Also examined is the effect of mass migration, mortality, and fertility on the population structure of both refugee camps, comparing them with the population structure of Kampuchea in 1962. (MEDLINE/TAC)

1D.026
Holtan, N. R. (1979). Health care problems among the Southeast Asian refugees: The boat people. *Minnesota Medicine, 62*, 633-634.

Refugee/Ethnic Group: Hmong

A St. Paul, MN, physician examines the health needs of the Hmong refugees and relates his personal experiences caring for them. In addition to medical problems, community needs and organizational problems are discussed. (NIUCSEAS/TAC)

1D.027
Inchaustegui, H. J. (1980). MSMS task force on Indochinese refugees dedicated to informing, coordinating MDs. *Michigan Medicine*, *79*, 418.

Refugee/Ethnic Group: Southeast-Asian

This article is the second in a series on Indochinese refugees and their physical and emotional health needs. The series began in the July issue of *Michigan Medicine*, with statistics on the newcomers, parasite treatment protocols, and a description of MSMS efforts to help the refugees. (MEDLINE/AUTHOR)

1D.028
Joe, V. (1981). A new lifestyle in a new land. *Canadian Nurse*, *77*, 16-19.

Refugee/Ethnic Group: Vietnamese

The health needs of the first group of Vietnamese refugees to Canada are addressed by the Ottawa Health Unit. (MEDLINE/TAC)

1D.029
Kegley, C. F., & Saviers, A. N. (1983). Working with others who are not like me. *The Journal of School Health*, 81-85.

Refugee/Ethnic Group: General

With the large influx of immigrants and refugees, medical professionals need to learn to understand the newcomers - and themselves. Language and various non-verbal communication types are discussed, Western values described and areas of health beliefs likely to differ from Western beliefs outlined. Includes list of resources. (TAC)

1D.030
Koval, D., & Walsh-Brennan, A. M. (1980). Exotic diseases you're sure to see more of. *RN*, *43*, 73-81.

Refugee/Ethnic Group: Southeast-Asian

This article is designed to provide an understanding of the refugees' physical health problems. The most significant health problems that reach this country with the Indochinese are tuberculosis, intestinal parasites, malaria, malnutrition, and anemia. These health problems are discussed in terms of screening, diagnosis, and suggested treatment. (NIUCSEAS/TAC)

1D.031
Lam, E. (1980). Health visiting Vietnamese refugees in Britain. *Health Visitor*, *53*, 254-255.

Refugee/Ethnic Group: Vietnamese

Five Vietnamese refugee families in a resettlement center in Manchester, England, received biweekly visits from a health visitor (a trained nurse and midwife). After the initial medical screenings had been completed, the visitor provided health education on a variety of topics. Mental health issues were addressed. (MEDLINE/TAC)

1D.032
Langford, A. (1980). Working with Cambodian refugees: Observations on the family practice ward at Khao I Dang. *Journal of Transpersonal Psychology*, *12*, 117-126.

Refugee/Ethnic Group: Cambodian

Gives a personal account of approaches taken to meet the physical, emotional, social, and spiritual needs of the refugees. The treatment team was holistically oriented, borrowing from the refugee's cultural and spiritual heritage, rather than relying solely on the traditional Western medical model. The team did not present themselves as experts who could diagnose and cure, but rather as respecters of individual persons, of healing spirits, and of culturally based fears and customs. It was felt that along with medical care the refugees needed self-esteem, emotional release, and human dignity and identity. ((c)APA)

1D.033
Levy, B. S. (1981). Working in a camp for Cambodian refugees. *The New England Journal of Medicine*, *304*, 1440-1444.

Refugee/Ethnic Group: Cambodian

Levy worked as a doctor in Khao I Dang refugee camp for six weeks in February and March, 1980. He gives a general description of the camp and the type of work he was involved with as a doctor. (CB-SARS)

1D.034
MacDougall, J. Y., & Mitchell, A. A. (1981). Vietnamese refugees in Lanarkshire. *Health Bulletin, 39*, 351-355.

Refugee/Ethnic Group: Vietnamese

This article describes the experiences of the Lanarkshire Health Board when working with two groups of newly arrived Vietnamese refugees. Medical screening indicated a high incidence among the refugees of intestinal parasites and anemia. Tuberculosis was a less common problem. The reaction of the local population was initially one of apprehension, but this lessened as integration efforts progressed. (MEDLINE/TAC)

1D.035
Muecke, M. A. (1983). Caring for Southeast Asian refugee patients in the USA. *American Journal of Public Health, 73*, 431-438.

Refugee/Ethnic Group: Southeast-Asian

This paper concerns care of refugees from Southeast Asia who speak little English and are relatively unfamiliar with the formal health care system in the United States. It aims to demystify the behaviors of refugee patients and to support health practitioners who are attempting to care for them. Western medicine is discussed in terms of the expectations that refugees tend to hold of it, and of the conflicts with Southeast Asian beliefs and practices which it presents. Despite language differences, health care agents can increase the effectiveness of their communication with persons from Southeast Asia, primarily by allowing for their viewpoints. Topics discussed are the first encounter with a refugee patient; use of interpreters; obtaining informed consent; "the passive obedient" patient; the "non-compliant" patient; body image; sources of social support for healing; use of medications; traditional self-care practices; and death and depression. (MEDLINE/AUTHOR)

1D.036
Munger, R. G. (1982). Sudden adult death in Asian populations: The case of the Hmong. In B. T. Downing, & D. P. Olney (Eds.), *The Hmong in the West: Observations and Reports*. (pp. 307-319). Minneapolis: Center for Urban and Regional Affairs, University of Minnesota.

Refugee/Ethnic Group: Hmong

This chapter explores the sudden death syndrome of the Hmong, and investigates the similiarities to a sudden death syndrome, called bangungut, in Filipino males. The author discusses three hypotheses regarding the causes of these deaths--nightmare fright, chemical exposure, and congenital effects due to inbreeding. He concludes that the most promising area of research is in the broad group of disorders of respiration during sleep known as the sleep apnea syndromes. (HB-SARS/TAC)

1D.037
Ong, J. (1981). Southeastern Asian refugees' presbyopia. *Perceptual & Motor Skills, 53*, 667-670.

Refugee/Ethnic Group: Southeast-Asian

Investigated the onset and terminal stages of presbyopia, the loss of amplitude of accommodation of the eye generally associated with old age, in 184 Southeastern Asian refugees, aged 11-42 yrs. An unusual feature, presbyopia occurring below the age of 35 yrs, was noted. The earlier onset and terminal stages of presbyopia of these Ss support the notion of the regional, ethnic, and environmental influences in the development of presbyopia. ((c)APA)

1D.038
Pearson, R. (1982). Understanding the Vietnamese in Britain. Part III: Health beliefs, birth and child care. *Health Visitor, 55*, 533-540.

Refugee/Ethnic Group: Vietnamese

The Vietnamese have their own traditional medical practices, and many of these treatments have been used effectively for thousands of years. The medical system in Vietnam is divided between "northern" and "southern" medicine. Chinese philosophy and medicines imported from Hong Kong influence the "northern" medical sector, whereas the south has been influenced by Western medicine. The author further outlines the differences in Western and Eastern medicine, and relates her personal experiences with traditional Chinese medicine. The dichotomies of Yin and Yang, and Hot and Cold are discussed, as well as the concepts of Wind (phong), Moxibustion (Dot Cuu), and the manual procedure of rubbing out the wind (Cao Gio). The article concludes with explanations of traditional Vietnamese pregnancy rituals, births, and childrearing behaviors. (MEDLINE/TAC)

1D.039

Pettersen, G. R., Noot, A. E., Dean, A. G., & Osterholm, M. (1980). Indochinese refugees: Health screening of Indochinese refugees. *Minnesota Medicine, 63*, 91-93.

Refugee/Ethnic Group: Southeast-Asian

This article provides recommendations for physicians caring for newly arrived Southeast Asians, including suggestions for screening, treatment, and immunization. (NIUCSEAS)

1D.040

Phillips, S. J. & Pearson, R. (1981). Dealing with Vietnamese refugees: Our plans. *British Medical Journal, 282*, 525-527.

Refugee/Ethnic Group: Vietnamese

Sixty-two Vietnamese refugees were received at a refugee resettlement center in Great Britain. Few protocols for screening, diagnosing, and treating were available prior to their arrival. Guidelines and policies were developed "on the job." Specific problems included poor or nonexistent medical records and the language barrier with resulting feelings of distrust of health care workers by the refugees. Given immediate priority were complete medical exams, immunizations, and treatment of intestinal infestation. (MEDLINE/TAC)

1D.041

Pickwell, S. M. (1983). Nursing experiences with Indochinese refugee families. *Journal of School Health, 53*, 86-91.

Refugee/Ethnic Group: Southeast-Asian

The author describes the evolution of a neighborhood in Linda Vista (San Diego, California) where she has worked as a nurse for 22 yrs. The availability of low-cost housing prompted the resettlement of many refugee families into the area. Community health care, the author's nursing experiences at the local elementary school, and the acculturation of the Indochinese refugees are discussed. ((c)APA)

1D.042

Putsch, R. W. (1985). Cross-cultural communication: The special case of interpreters in health care. *Journal of the American Medical Association, 254*, 3344-3348.

Refugee/Ethnic Group: General

Well trained interpreters are needed in health care settings where language and cultural barriers exist. Interpretation requires a great deal of skill, and interpreters find themselves in powerful positions conveying information between client and provider. Techniques exist that can make the interpretation process more effective and more efficient. (TAC)

1D.043
Reizen, M. S. (1980). Refugees' public health aspects. *Michigan Medicine*, *79*, 580.

Refugee/Ethnic Group: General

The current number of Indochinese refugees in Michigan is estimated at 7,000. Screening for communicable diseases in the overseas refugee camps is minimal, and so appropriate screening must be completed after their arrival in the U.S. Physical conditions needing special attention when screening include tuberculosis, hepatitis B., intestinal parasites, malaria, and inadequate immunization status. (NIUCSEAS/TAC)

1D.044
Robinson, C. (1980). Refugees pose little public health threat, but personal health needs must be met. *Michigan Medicine*, *79*, 419-420, 427.

Refugee/Ethnic Group: Southeast-Asian

Refugees pose little or no health threat to the U.S. population at large. However, provision of health care to refugees has been hampered by logistical problems and procedural complications. Medical care for refugees is provided by individuals and a wide variety of organizations. Significant health problems include intestinal parasites, anemia, skin conditions, malaria, tuberculosis, Hepatitis B., and dental caries. Increased attention is being focused on the emotional health needs of refugees to ease the stress of the resettlement process. (MEDLINE/TAC)

1D.045
Ryan, B. (1975). General factors in the mortality among refugees in Vietnam. *Medical Journal of Australia*, *1*, 625-629.

Refugee/Ethnic Group: Vietnamese

The author discusses the medical care for refugees within Vietnam in 1972. He cites 18 administrative problems in the refugee camps and resettlement areas which led to unusually high mortality rates from otherwise manageable diseases. (MEDLINE/TAC)

1D.046
Salzer, J. L., & Nelson, N. A. (1983). Health care of Ethiopian refugees. *Pediatric Nursing, 9*, 449-452.

Refugee/Ethnic Group: Ethiopian

Providing health care for refugee children requires an understanding of their culture and its influence on their health care beliefs. The authors' experiences caring for Ethiopian refugee children illustrate the need to integrate cultural awareness into comprehensive health care. (MEDLINE/AUTHOR)

1D.047
Schindeler, J. (1973). Cuban refugees and missing C Triradii. *Lancet, 2*, 323.

Refugee/Ethnic Group: Cuban

In this letter to the editor, the author discusses dermatoglyphic findings among Cuban refugees in Miami. As a routine part of genetic studies, dermatoglyphic classifications turned up what appeared to be a greater incidence of a missing c triradii on the palms of patients affected with learning disabilities or mental retardation. A control study, conducted on 90 male and 90 female school-age children of Cuban descent, found the Cuban population to have a higher frequency of missing c triradii than controls. The importance of the comparison of control prints and patient prints is emphasized by the fact that a missing c triradius is a diagnostic finding in the dermatoglyphics of Turner's syndrome. (MEDLINE/TAC)

1D.048
Schultz, S. L. (1982). How Southeast-Asian refugees in California adapt to unfamiliar health care practices. *Health & Social Work*, *7*, 148-156.

Refugee/Ethnic Group: Vietnamese; Lao; Cambodian; Chinese; Southeast-Asian

Interviewed 14 Southeast Asian refugees to determine their adjustment to Western medical care and to further illuminate the Vietnamese, Laotian, Cambodian, and Chinese health systems. It was noted, for example, that Buddhist monks treat mental health problems and ease family problems but are called upon only as a final recourse. The author stresses the role of the social worker in helping to resolve conflicts experienced by such clients over their adaptation to western practices. ((c)APA)

1D.049
Simmonds, S. P. (1980). Curative medicine or community health? Appropriate health services with refugees. *Journal of Tropical Medicine & Hygiene*, *83*, 49-52.

Refugee/Ethnic Group: General

Health teams from the United Kingdom are being increasingly sent as relief workers to refugee camps all over the world. It is proposed that a re-assessment of the type, skills and attitudes of health workers recruited to work among refugees is urgently needed. (MEDLINE/AUTHOR)

1D.050
Simmonds, S. P., & Brown, H. (1980). Curative medicine or community health? Appropriate health services with refugees. *Disasters*, *4*, 107-110.

Refugee/Ethnic Group: Angolan; Ethiopian; Somalian

A methodology is proposed for dealing with health problems in a refugee settlement on the basis of experience with refugees in Angola in 1978, & also in Zaire, Ethiopia, & Somalia. Aspects of the methodology include identification of health problems & needs, ranking of priorities, planning, communication, & evaluation. A particular need exists for long-term in addition to short-term planning. Meeting the community's basic health needs should be stressed. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1D.051
Snider, W. D., Simpson, D. M., Nielsen, S., Gold, J. W., Metroka, C. E., & Posner, J. B. (1983). Neurological complications of Acquired Immune Deficiency Syndrome: Analysis of 50 patients. *Annals of Neurology*, *14*, 403-418.

Refugee/Ethnic Group: Haitian

Fifty patients with Acquired Immune Deficiency Syndrome had complications affecting the central or peripheral nervous systems or both. The patients were either male homosexuals, intravenous drug abusers, or recently arrived Haitian refugees. They ranged in age from 25 to 56. Central nervous system complications were of four kinds: (1) Infections included Toxoplasma gondii abscesses in 5 patients, progressive multifocal leukoencephalopathy in 2, cryptococcal meningitis in 2, Candida albicans in 1, and possible Mycobacterium avium intracellulare in 3. Eighteen patients suffered a subacute encephalitis possibly attributable to cytomegalovirus infection. (2) Tumors consisted of primary lymphoma of the brain in 3 patients and meningeal invasion by systemic lymphoma in 4. (3) Vascular complications included nonbacterial thrombotic endocarditis in 2 patients and cerebral hemorrhages in the setting of thrombocytopenia in 3. (4) Undiagnosed central nervous system problems were evidenced as focal brain lesions in 3 patients and self-limiting aseptic meningitis in 4. Peripheral neuropathy occurred in 8 patients. (MEDLINE/AUTHOR)

1D.052

Stalcup, S. A., Oscherwitz, M., Cohen, M. S., Crast, F., Broughton, D., Stark, F., & Goldsmith, R. (1975). Planning for a pediatric disaster--Experience gained from caring for 1600 Vietnamese orphans. *The New England Journal of Medicine, 293*, 691-695.

Refugee/Ethnic Group: Vietnamese

A model for meeting, on short notice, the medical needs of large numbers of pediatric patients under disaster circumstances is presented to assist communities in effectively planning for future emergencies of this kind. Sudden confrontation with 1,600 children, arriving within a week's time, half of them with moderate to acute medical problems, taught the health officials of San Francisco the fundamentals of a readiness system for pediatric disasters. The plan used required rapid identification & involvement of lay & governmental resources, acute medical triage, provisions of ongoing medical care & basic nurturing services, & eventual discharge to adoptive families. Because 33% of the orphans were under 6 months of age, conventional nursery resources were insufficient & a "warehouse" model was implemented. This process required development of a specialized transportation & communications system, the services of 800 physicians, 1,400 nurses, 3,200 volunteers, & 162 back-up acute hospital beds. Recommendations offered were specifically concerned with a timely assessment of disaster preparedness in areas of: (1) pediatric care facilities, (2) pediatric supply capability, & (3) ambulance availability carrying pediatric equipment. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1D.053

Sudden, unexpected, nocturnal deaths among Southeast Asian refugees. (1982). G. Furst (Ed.). *American Journal of Forensic Medicine & Pathology, 3*, 277-279 .

Refugee/Ethnic Group: Southeast-Asian; Vietnamese

The article reviews the 38 cases to date of such deaths. Age, ethnic group, time of death, symptoms and autopsy results of victims are reviewed. Similarities suggest that this phenomenon is a distinct syndrome. Comparisons with sudden unexplained deaths in the U.S. as a whole and with those in Laos, Japan and the Phillipines are given. (MEDLINE/TAC)

1D.054
Tripp-Reimer, T., & Thieman, K. (1981). Traditional health beliefs/practices of Vietnamese refugees. *Journal of the Iowa Medical Society, 71*, 533-535.

Refugee/Ethnic Group: Vietnamese

Caring for Vietnamese patients is becoming more and more common among Iowa physicians. This discussion of the customs, values and health beliefs/practices may help physicians in providing treatment to these refugees. (MEDLINE/AUTHOR)

1D.055
Tung, T. M. (1980). The Indochinese refugees as patients. *Journal of Refugee Resettlement, 1*, 53-60.

Refugee/Ethnic Group: Southeast-Asian

Report on the experience of the Indochinese refugees as patients in their homelands and in the U.S. Report notes three Indochinese systems for explaining diseases: (1) physical agents, (2) manifestations of supernatural powers, and (3) disequilibrium of natural elements (such as an excess of "cold" or "hot" elements). Suggestions to American medical practitioners include: acknowledgement of the problem, use of bilingual/bicultural aides, more orientation pamphlets and translations of medical questionnaires, and direct communication with patients about their health problem. (NIUCSEAS)

1D.056
Waldman, E. B., Lege, S. B., Oseid, B., & Carter, J. P. (1979). Health and nutritional status of Vietnamese refugees. *Southern Medical Journal, 72*, 1300-1303.

Refugee/Ethnic Group: Vietnamese

There are presently more than 7,000 Vietnamese refugees living in the greater New Orleans area. This paper summarizes the health and information on nutrition now available regarding Vietnamese refugees living in the United States. It is hoped that this effort will add to the documentation of the health changes occurring in migrant populations, and also stimulate the development of programs which will improve the health of the Vietnamese refugees in the United States. Although information on both the national and local level is limited, the following problems are found frequently in the Vietnamese refugee population in this country: dental caries, skin infestations, lack of adequate immunizations, and tuberculosis. Very little information is available concerning dietary habits and their relation to growth and development. There is some evidence that American nutritional patterns are being superimposed on traditional Vietnamese patterns. Target areas for further research are suggested. (MEDLINE/AUTHOR)

1D.057
Wheat, M. E., Brownstein, H., & Kvitash, V. (1983). Aspects of medical care of Soviet Jewish emigres. *Western Journal of Medicine*, *139*, 900-904.

Refugee/Ethnic Group: Soviet; Jewish

Soviet Jewish emigres are a recently arrived refugee group in San Francisco and in other cities in the United States. They have frequently been perceived as a demanding and complaining population, particularly the elderly, often chronically ill members. These behaviors can also be seen as positive survival mechanisms that have evolved in response to the Soviet health care system and cultural background. An understanding of that background and system, together with time, greatly improves the interaction betyween Soviet Jewish patients and American physicians. (MEDLINE/AUTHOR)

1D.058
Wilson, J. L., Brunson, J., & Johnson, M. (1981). Health problems in Indochinese immigrants. *Journal of Family Practice*, *12*, 551-557.

Refugee/Ethnic Group: Southeast-Asian

Two Mobile, Alabama, family practice physicians and a social service director discuss the care provided to Southeast Asian refugees. The process of resettlement is described, beginning with the arrival in the refugee camp to resettlement in Mobile. The medical needs most commonly seen are tuberculosis, inadequate immunization, malaria, hepatitis, intestinal parasites, and to a much lesser extent leprosy and venereal disease. An alertness to the possibility of emotional or psychological problems should be part of any health screening process. (TAC)

1D.059
Zako, L. R. (1980). "Join me in this rewarding effort" - Caring for resettled Indochinese refugees. *Michigan Medicine*, *79*, 357, 360.

Refugee/Ethnic Group: Southeast-Asian

1D. Physical Health and Medical Care ...

The Michigan State Medical Society has made a committment to provide for the medical needs of the 8,000 Indochinese refugees who have resettled in Michigan. MSMS supports the Michigan Relief Fund, established by Governor William G. Milliken, by soliciting donations from Michigan physicians for the fund, and by working with volunteer organizations to obtain physicians and other health care professionals to serve in Southeast Asia for varying periods of time. (TAC)

The following references (identified by their bibliography number) also contain some information relevant to category **1D**:

1A.003, 1A.008, 1A.011, 1A.020, 1A.021, 1A.023, 1A.024, 1A.026, 1A.033

1B.024

1C.067

2A.028, 2A.030, 2A.039, 2A.042, 2A.055, 2A.056, 2A.059, 2A.063, 2A.064, 2A.071,

2D.010, 2D.031, 2D.041

2G.002, 2G.015

3A.001, 3A.003, 3A.009, 3A.011, 3A.015, 3A.019, 3A.021, 3A.022, 3A.023, 3A.029,
3A.030, 3A.038, 3A.039, 3A.042, 3A.043, 3A.044, 3A.047, 3A.054, 3A.055

3B.006

3E.003, 3E.004, 3E.005, 3E.013

4.004

The reader is advised to refer to the above references for more information regarding **Physical Health and Medical Care of Refugees.**

1E. Assimilation, Acculturation, and Adaptation ...

1E.001
Afton, J. (1980). Vietnamese immigrants in Denver: Two seasons of fieldwork in Sun Valley. In P. W. Van Arsdale & J. A. Pisarowicz (Eds.), *Processes of transition: Vietnamese in Colorado.* (pp. 53-62). Austin, TX: High Street Press.

Refugee/Ethnic Group: Vietnamese

Report on exploratory fieldwork conducted in the Sun Valley neighborhood of Denver from 1976 through 1978. The author describes the rapid growth in the number of Vietnamese households in Sun Valley from a total of 5 in 1976 to nearly 60 the following year. However, by 1978 many of these households had moved away either in search of better housing or as a result of continuing conflict with the Chicano population. Author notes a radical change in Vietnamese attitudes over the two-year period toward a more positive adaptation to American life. (NIUCSEAS)

1E.002
Barnouw, V. (1966). The Sindhis, mercantile refugees in India: Problems of their assimilation. *Phylon, 27*, 40-49.

Refugee/Ethnic Group: Sindhi

The partition of India and Pakistan in 1941 created mass migration of refugees from East and West Pakistan. The assimilation of refugees from Sind, West Pakistan, who have settled in the Poona District of Maharastra (an Indian state) is discussed. (TAC)

1E.003
Berry, J. W. (1986). The acculturation process and refugee behavior. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 25-37). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

The theme of this book, that there is a refugee experience leading to refugee behavior common to all groups of refugees, is continued in this chapter. Berry describes how the acculturation process is different for refugees compared to immigrants or native peoples and how it may be more stressful for refugees. The author begins with a discussion of the concept of acculturation, then describes important variations in both the acculturating group and the larger host society. Psychological responses to acculturation are reviewed, including aspects of language, personality, identity, and mental health. Berry concludes that assimilation is not the only mode of acculturation and that it is essential to consider the status of the group undergoing acculturation (i.e., whether they are refugees, immigrants, or native peoples), as well as the characteristics of the host society. Individual differences are also very important and clearly affect the general adaptation and mental health of the person experiencing acculturation. These issues are particularly relevant to policy-makers and professionals designing community-wide interventions to promote refugee mental health. (TAC)

1E.004
Brody, E. B., (Ed.). (1969). *Behavior in new environments: Adaptation of migrant populations.* Beverly Hills: Sage Publications.

Refugee/Ethnic Group: Alaskan-Eskimo; Black; Hispanic

The chapters in this book are adapted from working documents prepared as resource materials for a conference on "Migration and Behavioral Deviance," held in Dorado Beach, Puerto Rico, in November of 1968. The conference was supported by the section on the Center for Studies of Metropolitan and Regional Mental Health Problems NIMH. The book is divided into four sections which cover 1) the dimensions of the problem, 2) the adaptation of rural migrants to the industrialized city, 3) sociocultural and individual behaviors, and 4) program planning and research. Populations discussed include Appalachian and Kentucky migrants, Alaskan Natives, Negroes, Mexican Americans, and Puerto Ricans. A chapter on involuntary international migration is included. (SBIMHPIISF/TAC)

1E.005
Brown, G. (1982). Issues in the resettlement of Indochinese refugees. *Social Casework, 63*, 155-159.

Refugee/Ethnic Group: Southeast-Asian

Although each refugee group has its own culture the author believes that there are substantial similarities in their experiences to allow for the development of effective interventions. A major issue involves broken families and the feelings of guilt over not being able to help those left behind. Vocational transition, e.g., high status to menial labor; geographic dispersion across the U.S.; intergenerational conflict; and sponsorship issues are also discussed. (NIMH)

1E.006
Budreckis, A. M. (1982). Reluctant immigrants: The Lithuanian displaced persons. In D. L. Cuddy (Ed.), *Contemporary American immigration: Interpretive essays (European).* (pp. 173-205). Boston, MA: Twayne Publishers.

Refugee/Ethnic Group: Lithuanian

The movement of the Lithuanian refugees due to the Soviet takeover is traced from 1940 on. The 3-year sojourn in West German "displaced person" (DP) camps is discussed. The refugees' migration to the United States, as well as their initial impressions and adjustment processes are, presented. Factors which facilitate the refugee professional's assimilation into mainstream American life are identified. The negative response of the postwar immigrants to the prospects of returning to Lithuania are based on the continued Soviet occupation. (POPLINE/TAC)

1E.007
Cernius, V. J. (1980). The acculturation of a group of Lithuanian women: A follow-up study. *Journal of Baltic Studies*, *11*, 254-264.

Refugee/Ethnic Group: Lithuanian

This study continues research first begun in 1957 in Chicago. Twenty-four refugee women were followed over a sixteen year period and their social integration is described here. (SABRW)

1E.008
Chan, K. B., & Lam, L. (1983). Resettlement of Vietnamese-Chinese refugees in Montreal, Canada: Some socio-psychological problems and dilemmas. *Canadian Ethnic Studies/Etudes Ethniques au Canada*, *15*, 1-17.

Refugee/Ethnic Group: Vietnamese; Vietnamese-Chinese; Southeast-Asian

In an analysis of interview data collected as part of a four-phase longitudinal study of the adaptation of Indochinese refugees in Montreal, Quebec, between 1975 & 1981 (number of cases = 25 Vietnamese respondents), focus is on stress in sponsor-refugee relations, dreams, & refugees' preoccupation with the past. The sponsor-refugee relationship is conceptualized as a master-dependent relation underlined by a status difference & a cognitive gap that an affective bond cannot bridge. Analysis of dreams & routine thought processes of the refugees reveals a recurrent theme: an obsessive mental concern with separation from family members, & a strong wish for family reunification. Their mourning over what was lost or left behind in Vietnam seems to have interfered with their adaptation to life in Canada. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.009
Conick, J. E. (1983). Effects of non-clustering of refugees. *Migration Today, 11*, 26-28.

Refugee/Ethnic Group: General

For quick acculturation into the American way of life, the dispersal of refugees would seem to be the best method. Local officials and citizens do not feel 'swamped' by refugees; the refugee himself is more easily accepted in the community and learns more quickly to adapt to given situations. That the system has its drawbacks is demonstrated in this article by the Director of Migration and Refugee Services, Columbia, South Carolina. Dispersal in this state came about by chance rather than as the result of deliberate policy. Voluntary agencies placed refugees with sponsors on a first-come, first-served basis, without regard to current refugee populations, ethnic groupings or available services. The lack of public transportation in South Carolina proved to be a major obstacle both to employment and to English language learning, as there was no easy access from home to jobs, which tended to be centralized. Dispersal also meant that very few support groups could be established among the 'old' refugees for the 'new' refugees, which might have counteracted the 'suffocation of the refugee' by the sponsoring group. However, attempts by two voluntary agencies to adopt a more centrally organized resettlement approach, which would necessitate clustering, were less successful and were soon abandoned. (REFUGEE ABSTRACTS)

1E.010
David, H. P. (1969). Involuntary international migration: Adaptation of refugees. In E. B. Brody (Ed.), *Behavior in New Environments*. (pp. 73-95). Beverly Hills: Sage Publications.

Refugee/Ethnic Group: General

Chapter presents a review of the world refugee situation, notes trends in recent immigration to the U.S., discusses the dynamics of involuntary migration, summarizes reports of adjustment after migration to the U.S., Australia, Netherlands, and Israel, and considers implications for intervention. Over 100 selected references are provided. A summary on "Resources for Refugees" is listed in an appendix. (SBIMHPIISF/TAC)

1E.011
Estevez, G. A. (1983). Resettling the Cuban refugees in New Jersey. *Migration Today, 11*, 27-33.

Refugee/Ethnic Group: Cuban

This article includes some demographic data and a description of some of the problems encountered trying to settle a large group of Cuban refugees into New Jersey in 1980. (POPLINE/TAC)

1E.012
Fong, S. L. M. (1973). Assimilation and changing social roles of Chinese Americans. *Journal of Social Issues*, *29*, 115-127.

Refugee/Ethnic Group: Chinese

This article is concerned with the effects of social change on the role of relationships and adjustments of Chinese Americans. The influences of social change have created social disequilibrium both within the CA family as well as outside the home. The lifestyles of the old immigrants are based on the old world norms of knowing one's place in the family, a formal respectful expression of traditional roles between parent and child, and emphasis on family solidarity, and the traditional ways of gentleness, manners, and willingness to acquiesce. When CA children enter the American public school, they are taught the American value of asserting personal autonomy through independent decisionmaking. The child is then considered bicultural. The author concludes that Americanization has progressively diminished both psychological and behavioral differences between CA and other Americans. Although this change in cultural orientation appears to be evolutionary, at this time there is a slight reverse trend among CA youths who are sometimes seen as experiencing greater ethnic consciousness than their parents. (HAAPIMH/TAC EDITED)

1E.013
Fradd, S. (1983). Cubans to Cuban Americans: Assimilation in the United States. *Migration Today*, *11*, 34-42.

Refugee/Ethnic Group: Cuban

One tenth of the Cuban population is in the U.S., primarily in the Miami area. This paper offers a good review of the literature written on the integration of Cubans into American society following the Cuban Revolution. Compared with the Hispanic population in the U.S. as a whole, Cubans are older with a small proportion of young people, and have a higher median family income. Cubans who immigrated soon after the Revolution in 1959 have had a less difficult adaptation process than those who arrived on the Freedom Flotilla in 1980. American sentiment and governmental regulations were more receptive to the early Cuban refugees. Mental health professionals working with Cuban refugees in the Dade County area have concluded that there are great intergenerational differences in behavioral acculturation within immigrant families with adolescents because adolescents, especially males, acculturate more rapidly than the older family members. One's ability to learn English affects the assimilation process and, especially, the socioeconomic status. (POPLINE/TAC)

1E.014
Gordon, V. C., Matousek, I. M., & Lang, T. A. (1980). Southeast Asian refugees: Life in America. *American Journal of Nursing*, *80*, 2031-2036.

Refugee/Ethnic Group: Southeast-Asian

Authors provide a brief description of some of the problems encountered by Southeast Asian refugees and related cultural issues although it does not specifically address mental health issues. (NIMH)

1E.015
Hansen, A. (1979). Once the running stops: Assimilation of Angolan refugees into Zambian border villages. *Disasters*, *3*, 369-374.

Refugee/Ethnic Group: African; Angolan

The plight of many African refugees from former colonial lands is illustrated by the problems of Angolans who migrated to Zambia between 1966 & 1976. Since national consciousness is a new occurrence in many African countries, African refugees are perhaps somewhat better off than refugees elsewhere in terms of racial & cultural discrimination. Nevertheless, Angolans still were forced to leave money & property behind them & work long days to earn enough for sufficient food (eg, cassava). The struggle to acquire a surplus of food & gain time to develop crafts, cultivate land, & plan enterprises (ie, peddling goods) complicates the assimilation process. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.016
Hansen, A. (1982). Self-settled rural refugees in Africa: The case of Angolans in Zambian villages. In A. Hansen & A. Oliver-Smith (Eds.), *Involuntary migration and resettlement: The problems and responses of dislocated people.* (pp. 13-35). Boulder, CO: Westview Press.

Refugee/Ethnic Group: Angolan

This chapter describes Angolan refugees who chose to settle themselves in Zambian border villages rather than be settled in government-administered locations where they would receive assistance. To explain this decision to self-settle, the multidimensional losses suffered through dislocation are examined, particularily the loss of personal power. The chapter begins with a description of the basic features of African refugees and provides the ethnographic and historical context within which this refugee movement occured. An institutionalized three-phase process of assimilation is described, as are the options that were available to rural Angolans when the war began. The significance of kinship-based hospitality in securing and speeding self-settlement is explained. The explanation of the popular decision to self-settle points to the losses of power during dislocation and the ways in which self-settlement minimizes these losses and facilitates a return to more normal living conditions. (POPLINE/TAC)

1E.017
Hepp, P. (1980). Learning English, finding work refugees' two biggest challenges. *Michigan Medicine, 79*, 358.

Refugee/Ethnic Group: Southeast-Asian

The resettlement process of Southeast Asian refugees in the U.S. is outlined, focusing on the refugee population in the state of Michigan. (MEDLINE/TAC)

1E.018
Khoa, L. X., & Van Deusen, J. M. (1981). Social and cultural customs: Their contribution to resettlement. *Journal of Refugee Resettlement, 1*, 48-51.

Refugee/Ethnic Group: Southeast-Asian

Southeast Asian refugees have experienced many difficulties in adjusting to American life, due to the large gaps between cultures and to the sudden change of environment. Adjustment responses can be divided into three patterns: 1) the "old line pattern" adopted by many older refugees which involves resisting the adoption of new customs; 2) the "assimilative pattern" seen among many of the younger refugees who readily embrace new customs and relinquish old ones; 3) and the "bicultural pattern" which is the process of selectively adopting new customs while maintaining certain old ones. This response pattern is seen as the most effective response for newcomers to adopt in a pluralistic society. Mutual assistance groups help to develop a sense of belonging and a re-establishing of identity. (NIUCSEAS/TAC)

1E.019
Liu, W. T., & Murata, A. K. (1978). The Vietnamese in America, Part Five: The resettlement of the refugees. *Bridge: An Asian American Perspective, 6*, 55-60, 64.

Refugee/Ethnic Group: Vietnamese

This article delineates the background, the events, and the social processes through which a segment of the Vietnamese population has become an American refugee problem. (NIUCSEAS)

1E.020
Morrison, G. S., & Moos, F. (1982). Halfway to nowhere: Vietnamese refugees on Guam. In A. Hansen & A. Oliver-Smith (Eds.), *Involuntary migration and resettlement: The problems and responses of dislocated people.* (pp. 49-68). Boulder, CO: Westview Press.

Refugee/Ethnic Group: Vietnamese

This chapter is an account of what happened to the early refugees during April and May 1975 on the island of Guam. It illustrates how unprepared even technologically advanced societies are when suddenly they must receive large numbers of refugees. Discussed are specific problems of a worldwide nature-the sheltering, caring for and processing of people caught "halfway to nowhere." The chapter reflects the perceptions of the military officer in charge of the operation and an anthropologist interested in forced migration as an aspect of applied anthropology. (POPLINE/TAC)

1E.021
Nguyen, L. T., & Henkin, A. B. (1982). Vietnamese refugees in the United States: Adaptation and transitional status. *The Journal of Ethnic Studies, 9*, 101-116.

Refugee/Ethnic Group: Vietnamese

The transitional adaptation of two groups of Vietnamese refugees in the United States is investigated. The survey method was used for data collection from 366 heads of household. The first group (number of cases = 191) came to the United States in 1975 during the mass evacuation after the fall of the South Vietnamese government, under panic conditions that preceded the Communist victory. The second group (number of cases = 175) are "boat people," who arrived in the United States between 1977 & 1978, after one or two years of hardships under the new regime. Data revealed that the first wave of refugees include a larger percent of South Vietnamese well-to-do & highly educated. They appeared successful here in terms of acculturation & occupational adjustment. The boat people, with a large percent in the lower education level & shorter time in the United States, seem less successful. While the level of education of the refugees does positively correlate with their acculturation, which also relates positively to their occupational adjustment, there is no relationship between any of the three variables (level of education, acculturation, & occupational adjustment), &

satisfaction with life in the United States. The first wave, though more acculturated & successful, seems less than satisfied with the new life, & resistant to assimilation. The second wave, on the other hand, appears to appreciate the new country, feels satisfied with the new life, & identify with the United States population. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.022
Nguyen, L., & Burmark-Parasuraman, L. (1981). *The process of Americanization: Problems of the Vietnamese refugees.* Hayward, CA: Alameda County Superintendent of Schools Office.

Refugee/Ethnic Group: Vietnamese

This illustrated handbook focuses on Vietnamese values and attitudes, the transition from Vietnam to the United States, and the problems encountered by the refugees with respect to employment, education, legal issues, and American cuisine. (NIUCSEAS)

1E.023
Nicassio, P. M., & Pate, J. K. (1984). An analysis of problems of resettlement of the Indochinese refugees in the United States. *Social Psychiatry, 19,* 135-141.

Refugee/Ethnic Group: Southeast-Asian

This paper describes the results of a survey investigation on the adjustment of 1638 Indochinese refugees who have resettled in the United States. Refugees reported several areas of adjustment difficulty, although problems which reflected the trauma of separation and emigration were viewed as the most serious. Education, income, and employment were significantly related to indices of acculturation and alienation, thus indicating an interdependence between socioeconomic and sociocultural areas of adjustment. The importance of reinforcing mechanisms of social support among refugees is discussed. (MEDLINE/AUTHOR)

1E.024
Pakrasi, K. (1967). Occupation, class, migration, and family structure among the refugees of West Bengal, 1947-48. *Man in India, 47,* 200-213.

Refugee/Ethnic Group: Bengalese

The refugees of West Bengal 1947-48 have been studied with respect to their affiliation to different occupation classes in highlighting their differential behavior towards migration and family organization. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.025
Pastalan, L. A. (1964). An experiment in structured assimilation. *Phylon*, *25*, 331-336.

Refugee/Ethnic Group: General

Since World War II, immigration to America has largely been seen in the relocation of political refugees. This study was begun in 1956, and analyzes the effectiveness of an assimilation program undertaken by the Polish National Catholic Church Resettlement Agency. The organization of the program and problems encountered are examined. (TAC)

1E.026
Percal, R. M. (1978). The golden cage-Cubans in Miami. *International Migration*, *16*, 160-173.

Refugee/Ethnic Group: Cuban

Processes of adaptation to the host country of Cuban refugees in the Miami, Florida, area are analyzed, using three parameters: educational, geographic, & income mobility. A random sample of 100 Cuban noncitizens living in Florida in Jan 1972 was surveyed. Results showed that: most were working at jobs below their educational level, language was a major barrier, & 76% were earning below the United States median income. This suggests that mobility is minimal & that there is a significant waste of human resources. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.027
Perez, M. M. (1984). Exile. The Chilean experience. *International Journal of Social Psychiatry*, *30*, 157-161.

Refugee/Ethnic Group: Chilean

A Chilean psychiatrist discusses the process of exile, and the adjustments and difficulties experienced by individuals during that process. (MEDLINE/TAC)

1E.028
Pham, K. L. (1981). The forgotten refugee: A story of the Gulf Coast refugees. *Journal of Refugee Resettlement, 1*, 3-5.

Refugee/Ethnic Group: General

Describes the experience of refugees placed on the Gulf Coast as they confront the limitation of institutions in resettlement and their own confusion and unfamiliarity with their new surroundings. (NIUCSEAS)

1E.029
Pisarowicz, J. A., & Tosher, V. (1982). Vietnamese refugee resettlement: Denver, Colorado, 1975-1977. In A. Hansen & A. Oliver-Smith (Eds.), *Involuntary migration and resettlement: The problems and responses of dislocated people.* (pp. 69-81). Boulder, CO: Westview Press.

Refugee/Ethnic Group: Vietnamese

This chapter focuses on the adaptation process of refugees resettled in Denver, Colorado. A brief discussion of the background of the refugees is provided followed by an examination of the actual process of refugee adaptation to the United States. Three phases of adaptation are presented. The adaptation of refugees living in the Vietnamese community of Sun Valley and those living in a non-Vietnamese community environment are compared and contrasted. Finally, a multivariate model of refugee-migrant adaptation is presented and discussed. (TAC)

1E.030
Portes, A. (1969). Dilemmas of a golden exile: Integration of Cuban refugee families in Milwaukee. *American Sociological Review, 34*, 505-518.

Refugee/Ethnic Group: Cuban

The Cuban Revolution removed the old upper and middle strata from their dominant postitions. Many of these people came to the U.S. with the intention of overthrowing Castro and returning to Cuba. After 1962, however, they had to start resettling in U.S. communities. This paper examines their integration as a fundamental shift from strong psychological attachments to the past to values and identities congruent with the new environment. Among 48 refugee families in Milwaukee, it was found that integration is strongly influenced by relative level of present socioeconomic rewards. Results are interpreted as consequences of the rational-individualistic ethnic characterizing families from these formerly dominant sectors of Cuba. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.031
Reimann, H. (1961). The refugee and his country of refuge. *International Journal of Comparative Sociology*, *2*, 70-80.

Refugee/Ethnic Group: German

The integration of refugees in the German Federal Republic (West Germany) is examined, providing insight into the problems encountered by migrant groups who emigrate to an ethnically similar environment. (TAC)

1E.032
Rubin, B. S. (1982). Refugee resettlement: A unique role for family service. *Social Casework*, *63*, 301-304.

Refugee/Ethnic Group: General

Explores the complex casework process involved in refugee resettlement and reviews C. E. Sluzki's (1979) 5-stage migration model that deals with the dynamics of stress within a family during this period of upheaval. Aspects of family and community sponsorships are outlined along with 2 levels of resettlement--before and after financial independence. The need for family agency involvement in this area is emphasized. ((c)APA)

1E.033
Rumbaut, R. D., & Rumbaut, R. G. (1976). The family in exile: Cuban expatriates in the United States. *American Journal of Psychiatry*, *133*, 395-399.

Refugee/Ethnic Group: Cuban

For the nearly one million Cuban exiles in the US, expatriation has meant anguish, uprootedness, challenge, and accomplishment. Several factors are given as accounting for the comparatively successful aspects of their struggle: relatively high occupational and educational levels, formation of vigorous communities that permit a positive ethnic consciousness and the creation of strong social ties, and effectively organized reception by the US. It is noted that expatriation is always traumatic, but mastery of the struggles it involves can lead to personal growth and expanded horizons. It is concluded that the Cuban experience shows that the influx of large numbers of refugees can be an enriching process for both the host country and the individual refugee. ((c)APA)

1E.034
Scott, G. M., Jr. (1982). The Hmong refugee community in San Diego: Theoretical and practical implications of its continuing ethnic solidarity. *Anthropological Quarterly*, *55*, 146-160.

Refugee/Ethnic Group: Hmong

The Lao Hmong refugees in San Diego, California, have retained their traditional sense of ethnicity despite strong assimilative forces that threaten to weaken it. These forces are both external & internal in origin, the former being concentrated in the action of local social service providers & the latter existing as a rational, purposive strategy applied by the Hmong community leaders. The leaders, however, also join with their people in desiring the maintenance of ethnic solidarity. An explanation for this assimilation-contra-assimilation paradox is sought by examining factors in Hmong culture, both past & present, in the light of various theoretical approaches common in the literature on ethnicity. An approach that addresses the interaction of primordial sentiments, structural conditions, & interest-based ethnic movements is best suited for this purpose, & an attempt is made to apply this understanding to the concerns of refugee policymakers & social service providers. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.035
Skinner, K. A., & Hendricks, G. L. (1979). The shaping of ethnic self-identity among Indochinese refugees. *The Journal of Ethnic Studies*, *7*, 25-41.

Refugee/Ethnic Group: Southeast-Asian

Ethnic identity involves both self-awareness & interaction with others; this emerges in a process significantly affected by adaptation of immigrants to a new environment. Indochinese immigration to the United States from 1975 on is an example of this process. The Indochinese were the first population of refugees to enter the United States when the dominant ideology had shifted from assimilation to cultural diversity, suggesting the differences in adaptation should be identifiable. Refugees had no support group already in the United States, but had to depend on the federal government for patronage; dispersal of refugees created pressure for assimilation. The increasing involvement of Indochinese in United States society has given the refugee status less meaning. Indochinese students have been given aid as members of minorities, but, in fact, have little understanding of the minority experience of blacks & similar groups. Refugees have begun to adopt the "Asian" label to deal with the United States, but this is not a category of significance to them in their own cultures. Definition as a minority may in time turn out to create problems for the Indochinese, despite its strategic value in the short run. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.036
Smedley, L. (1979). The absorption of a refugee group into South African society. *Humanitas, 5*, 131-138.

Refugee/Ethnic Group: Czech

After the 1968 invasion of Czechoslovakia by the USSR, Czechoslovakian refugees came to South Africa. These refugees differ from other European immigrants to South Africa in both their refugee status & the more acute problems involved in their absorption into South African society. Data from two studies conducted in 1971 & 1976 by the Institute for Sociological, Demographic, & Criminological Research of the Human Sciences Research Council are used to assess the extent of such problems. In general, they have been overcome with a strong tendency toward upward mobility; the Czechoslovakian refugees resident in Pretoria are integrated into life in South Africa without relinquishing their own cultural identity. While economically adjusted to South African society, they remain conscious of a non-South African cultural heritage; female immigrants in particular are still involved in adapting to life in South African society on a social level. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.037
Smither, R. (1981). Psychological study of refugee acculturation: A review of the literature. *Journal of Refugee Resettlement, 1*, 58-63, 81.

Refugee/Ethnic Group: General

Psychological studies of the normal process of refugee acculturation are relatively rare. This paper reviews some of the empirical research on the psychological adjustment of refugees. The post World War I period produced a number of psychoanalytic studies dealing with refugees and the psychopathology resulting from displacement. Following World War II, emphasis in the study of adaptation shifted away from psychopathology, and was focused, instead, on relevant social factors and their effects on the development of depression, disillusionment, guilt, aggressive behavior and other conditions. Drawing on theoretical and empirical approaches, recent research has been done on the effects of the acculturative process on anxiety in children, family behavior and values, integration and anxiety. Understanding the relationships between the normal acculturative process and resulting psychological problems will be useful in making that process less difficult. (TAC)

1E.038
Smither, R., & Rodriguez-Giegling, M. (1982). Personality, demographics, and acculturation of Vietnamese and Nicaraguan refugees to the United States. *International Journal of Psychology, 17*, 19-25.

Refugee/Ethnic Group: Vietnamese; Nicaraguan

The influx of refugees into the US in recent years has led to a new interest in acculturation on the part of American psychologists. Previous research in this area has usually focused on demographic, rather than psychological, variables as predictors of a willingness to acculturate. Using data from 114 Vietnamese and 32 Nicaraguan Ss (20-49 yrs of age), the present study compared personality factors and age, level of education, and time in the U. S. as predictors of acculturation. Although results for Nicaraguans were mixed, personality factors emerged as being better predictors in the Vietnamese group. This suggests that in some cases, personality factors may be more basic to the process of acculturation than previously assumed. ((c)APA)

1E.039
Soskis, P. (1967). The adjustment of Hungarian refugees in New York. *International Migration Review*, *2*, 40-46.

Refugee/Ethnic Group: Hungarian; Jewish

A survey of 200 randomly selected Hungarian refugee families, resettled in New York, examined the success of resettlement in terms of economic progress, standard of living, and education. The role of the New York Association for New Americans, a New York area resettlement and rehabilitation agency, is also discussed. The study suggests that both informal or familial and formal or agency help is invaluable to refugees. (TAC)

1E.040
Spring, A. (1979). Women and men as refugees: Differential assimilation of Angolan refugees in Zambia. *Disasters*, *3*, 423-428.

Refugee/Ethnic Group: African; Angolan

Although there has been gradual migration of Angolans to Zambia for several centuries, this movement was accelerated by the war of liberation in Angola. Problems of resettlement faced by Angolans are described, the relative success of different population groups is assessed, & the effects of sex & age on resettlement are analyzed. Angolan women generally achieve some degree of success more quickly than men; younger ones often divorce refugee husbands & take up with established settlers. Male refugees have a more difficult lot, enduring both poverty &, in many cases, living without a wife. Angolan refugees are also often stereotyped by Zambian residents as being uneducated & backward culturally & politically. However, Zambians do benefit from the Angolans' native health lore

& medical skills; Angolan women health practitioners, or curers, especially older women (aged 40-60), are more successful than male ritualists. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.041

Spring, A. (1982). Women and men as refugees: Differential assimilation of Angolan refugees in Zambia. In A. Hansen & A. Oliver-Smith (Eds.), *Involuntary migration and resettlement: The problems and responses of dislocated people.* (pp. 37-47). Boulder, CO: Westview Press.

Refugee/Ethnic Group: Angolan

This chapter considers resettlement of refugees and their reception by people of the same or similar ethnicity in the new situation. People may perceive themselves as belonging to both an ethnic group and a nation-state, which is sometimes problematic for groups that find themselves on opposite sides of international borders. This chapter considers a case of resettlement in which refugees found their own solutions and spontaneously resettled. It is based on field research carried out from 1970 to 1972 and briefly in 1977, and examines differential assimilation of men and women of varying ages into the new situation. The focus is on the differential assimilation of different groups of the population, and how sex and age affect the ease of resettlement. (POPLINE/TAC)

1E.042

Starr, P. D., & Roberts, A. E. (1982). Community structure and Vietnamese refugee adaptation: The significance of context. *International Migration Review, 16*, 595-618.

Refugee/Ethnic Group: Vietnamese

This article examines the significance of understanding the refugee experience as a product of the relationship between individual refugees and the larger social context of environment. It suggests that studies focusing upon such relationships, linking both micro and macrolevel data, could provide useful insights about refugee adaptation in varied contexts. To illustrate the usefulness of such an approach, an analysis of the effects of community structure upon the adjustment of a sample of Vietnamese refugees in America is presented. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.043
Stein, B. N. (1979). Occupational adjustment of refugees: The Vietnamese in the United States. *International Migration Review, 13*, 25-45.

Refugee/Ethnic Group: Vietnamese; German; Hungarian; Cuban

Patterns of occupational adjustment of Vietnamese refugees to the United States are examined on the basis of official statistical records. These patterns are compared with those of refugees from Nazi Germany, Hungary, & Cuba, & recent groups of United States & Canadian immigrants. Refugees experience substantial downward mobility & difficulty in adjusting to the United States; it appears that their position after four years is likely to be the final one, but more study is needed on this phase. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

1E.044
Strand, P. J., & Jones, W. Jr. (1985). *Indochinese refugees in America: Problems of adaptation and resettlement.* Durham, NC: Duke University Press.

Refugee/Ethnic Group: Southeast-Asian

Over 670,000 Indochinese refugees have resettled in the United States in the recent past. Of these more than a quarter million live in California, many in the San Diego area, the locus of this study. Using native-language interviews with samples from the major ethnic groups represented by the refugees (Vietnamese, Laotian, Hmong, and Cambodian), the authors reveal significant factors affecting the settlement experience of these immigrants. These factors include their relative youth and the effect of their traditions and family structure on their adaptation to American society. The authors also study the impact of various factors on the refugees' employability, their use of health and social services, and their own perceptions of the obstacles to their successful resettlement. From the responses and their analyses of them, the authors derive policy recommendations applicable to other immigrant groups facing resettlement, and to the communities that host them. (TAC/PUBLISHER)

1E.045
Sue, S., & Zane, N. W. S. (1985). Academic achievement and socioemotional adjustment among Chinese university students. *Journal of Counseling Psychology, 32*, 570-579.

Refugee/Ethnic Group: Asian; Chinese

Chinese Americans have been considered as high achievers and excellent students. In this study, the academic performance, majors, study habits, and socioemotional adjustment of 177 Chinese university students were examined. Data were collected through official university records, questionnaire, and inventories. Results indicated that the image of the high achieving, well-adjusted Chinese student is tempered when examining criteria other than grade point average. Although grades received by the three groups of Chinese exceeded the university average, recent immigrants apparently used certain strategies to compensate for limited English proficiency by taking reduced courseloads, studying more hours, and limiting career majors. There also was evidence that the recent immigrants were less socio-emotionally adjusted than were other Chinese students. Implications for counseling and research are discussed. (AUTHOR)

1E.046

Taft, J. V. (1983). Time to refocus: Refugee resettlement strategies. In L. F. Tomasi (Ed.), *In defense of the alien, v. 5: Refugees and territorial asylum.* (pp. 79-84). Staten Island, NY: Center for Migration Studies.

Refugee/Ethnic Group: General

Chapter addresses three key areas which would substantially strengthen refugee resettlement: 1) role definition; 2) culturally appropriate resettlement; and 3) restructuring service delivery. The first area concerns defining and clarifying the roles of the federal, state and local governments; voluntary resettlement agencies and mutual assistance groups, and finally, the refugees themselves. By integrating the existing resettlement networks with mutual assistance associations, the process of acculturation becomes more culturally sensitive. Service delivery areas in need of restructuring include: targeting assistance for refugees in the early months of arrival; eligibility for medical assistance which is separate from cash assistance; and the provision of a single payment standard for noncategorically eligible refugees needing income support, modeled on the Supplementary Security Income system, which would be federally funded. (POPLINE/TAC)

1E.047

Taft, R., & Goldlust, J. (1970). The current status of former Jewish refugees in Melbourne. *The Australian and New Zealand Journal of Sociology, 6*, 28-48.

Refugee/Ethnic Group: Jewish

This paper analyzes the status of Jewish refugees in Melbourne, Australia. A randomly selected sample of 504 adult Jews was surveyed regarding their economic and social integration, educational achievements, perception of anti-Semitism, social relations, identification as Jews, and attitudes to politics. Comparisons are made between those who had spent a part of their lives in Nazi-occupied Europe, and those who were either born in Australia or who had arrived there before the age of ten from the United Kingdom. (TAC)

1E.048
Wenk, M. G. (1968). Adjustment and assimilation: The Cuban refugee experience. *International Migration Review*, *3*, 38-49.

Refugee/Ethnic Group: Cuban

Describes a study of Cuban refugees in the United States. An 85-item questionnaire was sent to a sample of 200 Cuban families representing 534 adults and 593 children. Topics covered included questions concerning background, education, family composition, acceptance of the new environment, and degree of assimilation in the new culture. Results are detailed and suggest that the Cuban is self-sufficient, progressive, and eager to adapt to his new surroundings, and "possesses the will and energy to become a productive and beneficial member of society". ((c)APA)

1E. Assimilation, Acculturation, and Adaptation ...

The following references (identified by their bibliography number) also contain some information relevant to category 1E:

1A.001, 1A.006, 1A.009, 1A.013, 1A.015, 1A.016, 1A.019, 1A.026, 1A.029

1B.001, 1B.003, 1B.004, 1B.007, 1B.009, 1B.017, 1B.019, 1B.021, 1B.022, 1B.033, 1B.034, 1B.035, 1B.036, 1B.037, 1B.038, 1B.041

1C.001, 1C.004, 1C.007, 1C.012, 1C.015, 1C.016, 1C.021, 1C.026, 1C.034, 1C.038, 1C.044, 1C.057, 1C.060, 1C.066, 1C.067, 1C.069, 1C.070, 1C.074, 1C.075, 1C.077

1D.021

2A.003, 2A.004, 2A.005, 2A.010, 2A.016, 2A.018, 2A.020, 2A.021, 2A.023, 2A.024, 2A.029, 2A.030, 2A.035, 2A.037, 2A.038, 2A.044, 2A.045, 2A.046, 2A.047, 2A.051, 2A.053, 2A.054, 2A.061, 2A.062, 2A.063, 2A.064, 2A.066, 2A.068, 2A.073, 2A.076

2B.005, 2B.010, 2B.015, 2B.025, 2B.031, 2B.032, 2B.037, 2B.040, 2B.042, 2B.048, 2B.057, 2B.059

2C.001, 2C.004

2D.007, 2D.034

2E.003, 2E.010, 2E.015, 2E.018

2F.026

2G.001, 2G.002

3A.004, 3A.012, 3A.017, 3A.018, 3A.021, 3A.025, 3A.026, 3A.030, 3A.035, 3A.037, 3A.047

3B.007, 3B.008

3C.002

3D.001, 3D.002, 3D.004, 3D.005, 3D.007

4.006, 4.008, 4.010, 4.011, 4.013

The reader is advised to refer to the above references for more information regarding **Assimilation, Acculturation, and Adaptation.**

SECTION 2

SPECIFIC MENTAL HEALTH ISSUES AND REFUGEES

2A. Typical or Common Mental Health Problems ...

2A.001
Acuda, S. W. (1983). Mental health problems in Kenya today--A review of research. *East African Medical Journal, 60*, 11-14.

Refugee/Ethnic Group: Kenyan

In this article the author reviews published literature on mental health problems in Kenya today. The literature on alcoholism and drug abuse was reviewed separately. Major findings to be high-lighted are: (1) every fourth patient attending a general out-patient clinic in this country is probably primarily psychiatrically disabled, (2) the commonest psychiatric disorders among out-patients are anxiety and depression, (3) quite a large number of patients with psychiatric disturbances consult traditional healers. (MEDLINE/AUTHOR)

2A.002
Aylesworth, L. S., Ossorio, P. S., & Osaki, L. T. (1979). Stress and mental health among Vietnamese in the United States. In R. Endo, S. Sue, & N. Wagner (Eds.), *Asian-Americans: Social and psychological perspectives.* Palo Alto, CA: Science and Behavior Book, Inc.

Refugee/Ethnic Group: Vietnamese

Author focuses on Vietnamese refugees, 89% of Indochinese admitted to U.S. between 1975 and 1977, for study. Author presents results of the Denver Study, an open ended interview study of 50 adult Vietnamese, selected as a cross section of the population. Initial problems and fears in the U.S. and of resettlement are reported. Author found that Vietnamese define mental illness differently, i.e., less severe emotional behavioral disturbances are believed to reflect youth and life's circumstances and "remain" with the family; it is weak to ask for help. In some cases the priests and village elders (problems of agitation, confusion, "acting out") or shaman/fortune teller (e.g., loss of money, hope, etc) might be consulted. More serious psychopathology is feared, avoided, and/or stigmatized and these people are sent to state mental hospitals as a last resort. Refugee presenting problems were: 1) Depression (most prevalent) often with "busy-busy" syndrome: hypomanic state and preoccupied with trivial here and now tasks; "anomic" syndrome: no motivation of life goals, acts in socially inappropriate manners, somewhat sociopathic; usually single servicemen; 2) Dependency: usually wife and elderly; 3) Isolation: fear of people, transportation, anger at U.S., etc.; usually elderly, sometimes wives or servicemen; 4) Psychoses: rare and most had been diagnosed in Vietnam; 5) Paranoid reactions: usually brief and nonrepetitive. Mental health treatment (all may be used): 1) Traditional therapy: usually inpatient care; Vietnamese and Indochinese are often viewed as uncooperative. 2) Pluralism model: pragmatic, deals with life problems not diagnoses; outreach and consultation services (Denver program). 3) Enrichment model: uses bilingual, bicultural workers, provides diverse services, emphasis on adjustment; criticized for not being more mental health oriented (Seattle program). Author provides case examples. (NIMH)

2A.003

Bernard, W. S. (1976). Immigrants and refugees: Their similarities, differences, and needs. *International Migration, 14*, 267-281.

Refugee/Ethnic Group: General

Data concerning "voluntary" & "involuntary" migrants to the United States are presented & generalizations for other areas of the world cited. While immigrants represent all sectors of society, most often they are from the economically, socially, & politically underprivileged classes. Refugees, by contrast, are usually from all social classes &, as a group, they display higher educational levels than immigrants. Although the question of psychological differences has not yet been adequately investigated, preliminary evidence indicates that both groups are prone to the same psychoses. It is indicated, however, that the refugee may suffer more frequently & to a greater degree. In employment, immigrants have usually had to fend for themselves, while refugees (particularly those arriving after World War II) have received considerable assistance. Common problems shared by immigrants & refugees are those of language, housing, & lack of information about their new homeland. If the host country expects assimilation & conformity, both groups encounter major difficulties, but if cultural pluralism is accepted, ethnicity can be an advantage. Since the needs & wants of immigrants & refugees are basically the same, it is suggested that: (1) more voluntary service agencies are needed, (2) more governments should develop & implement services for migrants, (3) communities should be more receptive to interethnic association, & (4) service personnel should be familiar with the language & cultures of their clients. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2A.004

Berthold, M. C. (1976). On Sue, Sue, and Sue. *American Psychologist, 31*, 541.

Refugee/Ethnic Group: Vietnamese

This is a brief response to an article that appeared in the *American Psychologist* on Asian-Americans as a minority group (Sue, Sue, & Sue, 1975). The author elaborates on the Sue et. al. paper with special reference to Vietnamese refugees and issues of discrimination. (TAC)

2A.005
Bliatout, B. T. (1979). *Problems of acculturation of the Hmong in Hawaii.* Honolulu: Institute of Behavioral Sciences.

Refugee/Ethnic Group: Hmong

Review of the background and mental health problems of the Hmong. Author describes the Hmong in terms of their historical origins, geographic distribution, culture, recent history and arrival in Hawaii. Their mental health problems are related to the resettlement process, language, re-education plan, loss of status, loss of relatives, and disruption of family relations. Author summarizes two case examples and makes the following suggestions: (1) Make mental health services easily accessible. (2) Avoid the term "mental health" and disguise counseling as "educational" or "family relations program." (3) Train Hmong as paraprofessionals and professionals in the field of mental health. (NIMH)

2A.006
The boat people: Coping in Canada. (1984). *Canadian Journal of Psychiatric Nursing, 25,* 4-5.

Refugee/Ethnic Group: Vietnamese; Lao

The authors interview a young Vietnamese refugee and a Canadian couple working with Laotians about their impressions of the difficulties that are involved in the Indochinese refugees' adaptation to life in Canada. (MEDLINE/TAC)

2A.007
Boman, B., & Edwards, M. (1984). The Indochinese refugee: An overview. *Australian & New Zealand Journal of Psychiatry, 18,* 40-52.

Refugee/Ethnic Group: Southeast-Asian

Reviews the sociocultural features of Australia's recently arrived 51,000 Indochinese refugees and discusses the incidence of psychiatric dysfunctions among them that has been promoted by decades of warfare. The fact of significant psychopathology is supported by clinical surveys. The psychological responses to migration and resettlement, including persisting feelings of guilt, bewilderment, and pining, are reviewed; the subsequent difficulties in marriage, family, employment, and education are also discussed. Research indicates high continuing levels of psychiatric dysfunction, especially among refugees lacking social support or experiencing status dislocation. Suggestions are made for culturally acceptable forms of assessment and therapy. ((c)APA)

2A.008
Burvill, P. W. (1973). Immigration and mental disease. *Australian & New Zealand Journal of Psychiatry, 7*, 155-162.

Refugee/Ethnic Group: Hungarian; Israeli; Norwegian; General

A literature review of mental disorders and hospital admission rates for various immigrant and refugee groups worldwide is presented. Due to the non-comparability of the various study methodologies and definitions, few conclusions can be drawn. (MEDLINE/TAC)

2A.009
Cochrane, R. & Stopes-Roe, M. (1981). Social class and psychological disorder in natives and immigrants to Britain. *International Journal of Social Psychiatry, 27*, 173-183.

Refugee/Ethnic Group: Indian; Pakistani

A study tested the social selection and social causation hypotheses--two explanations of the frequently observed inverse relationship between social class and psychological disturbance. A sample of 200 Indian-born, 200 Pakistani-born, and 240 native-born residents of England participated in interviews that explored social class, psychological symptoms, and other relevant variables. The findings, which failed to support either of the two hypotheses, are discussed in regard to differential selection for migration and the varying experiences of immigrants after arrival in Britain. (SOCIAL WORK ABSTRACTS/AUTHOR/EDITED)

2A.010
Cohon, J. D. (1981). Psychological adaptation and dysfunction among refugees. *International Migration Review, 15*, 252-275.

Refugee/Ethnic Group: General

This article reviews the studies of observed psychological dysfunction of post-World War II and Hungarian refugees; the complex factors influencing the refugee experience; the sophisticated research methods used in studying Cuban and Indochinese refugees; an examination of treatments employed for different refugee groups and an argument for the use of behavioral descriptions of refugee symptomatology. (TAC/AUTHOR)

2A.011
Coleman, C. M. (1980). Mental health problems of Indochinese refugees in the United States. *Refugees and Human Rights Newsletter, 4*, 7-8.

Refugee/Ethnic Group: Southeast-Asian

Brief review and analysis of the social-psychological problems faced by Indochinese refugees in the U.S. Author notes the very profound traumas experienced by refugees during their flight. After-effects of anxiety, guilt, and emotional isolation are likely. Cambodians, in particular, are subject to "survival guilt." In the U.S. the stresses of adjustment are particularly great for the elderly, single males, and those who had high social status in their country of origin. Author suggests that the major program needs are for: (a) more preventive services, including efforts in the Southeast Asian refugee camps, (b) more extensive and culturally appropriate employment training, and (c) greater participation by the refugees themselves. (NIUCSEAS)

2A.012
Dube, K. C. (1968). Mental disorder in Agra. *Social Psychiatry, 3*, 139-143.

Refugee/Ethnic Group: Indian; Punjabi

In a population survey of rural, semirural, and urban areas of Agra the lifetime prevalence of severe mental disorders was 23.79/1000 and conditions such as schizophrenia and severe mental retardation occurred with approximately the same frequency as in other parts of the world. Severe hysterical states were common, particularly among women, among illiterate people in joint families, and in castes which provided very protected conditions for females. High rates were also found among Punjabi refugees, who had had particularly difficult experiences during their migration. ((c)APA)

2A.013
Dube, K. C., & Kumar, N. (1973). An epidemiological study of manic-depressive psychosis. *Acta Psychiatrica Scandinavica, 49*, 691-697.

Refugee/Ethnic Group: Indian

To determine the prevalence of manic-depressive psychosis among Indians, a team consisting of a psychologist, statistician, social workers, and psychiatrists surveyed 29,468 inhabitants of rural, semirural, and urban areas. 37 cases were discovered, giving a prevalence rate of 1.26 per 1,000 people. 81% of these cases came from urban areas. There was a nonsignificant tendency for females to have a higher prevalence rate. The prevalence rate was highest in males aged 55 and over and in 35-54 yr old females. Persons engaged in business showed a greater tendency to develop the disorder than any other occupational group. Males living in joint families had a higher prevalence rate than those living in nuclear families. Prevalence rates were higher for Indian refugees than for nonrefugees and for female members of higher social castes. The effects of industrialization, the caste system, and drugs on these prevalence rates are discussed. ((c)APA)

2A.014
Eisenbruch, M. (1984). Cross-cultural aspects of bereavement. I: A conceptual framework for comparative analysis. *Culture, Medicine and Psychiatry*, *8*, 283-309.

Refugee/Ethnic Group: General

This paper reviews some key conceptual questions in the study of cross-cultural aspects of bereavement. Six questions are reviewed in cross-cultural perspective: whether individuals in all societies share the same private experience and public expression of grief; whether the stages of grief occur in the same sequence and at the same rate in all cultures; the nature of the relationship between the individual's private grief and his public mourning; the reactions of children to death, and the reactions of adults to the death of children; the role of religious belief; and the possibility that an ethnic group can experience collective grief in response to uprooting. (MEDLINE/AUTHOR)

2A.015
Eisenbruch, M. (1984). Cross-cultural aspects of bereavement. II: Ethnic and cultural variations in the development of bereavement practices. *Culture, Medicine and Psychiatry*, *8*, 315-347.

Refugee/Ethnic Group: Chinese; Southeast-Asian; Haitian; Italian; Greek; Hispanic; Black

Despite a growing interest in bereavement in cross-cultural perspective, few reports have described a comparative analysis of bereavement. By examining the social contexts in the transformations of Western bereavement practices, structures common to bereavement in a range of cultures can be identified. The paper compares the contemporary bereavement practices of several ethnic and cultural groups in North America: Blacks; ethnic Chinese; Southeast Asian refugees; Haitians; Italians; Greeks; and Spanish-speaking groups. Consideration is given to the state of widowhood in different cultural systems. The impact of modernization among traditional societies demonstrates that even though Western technologies are incorporated into the procedures followed by these modernizing societies, the deep cultural code remains intact. Five questions require further clarification: is bereavement an illness, or a rite de passage and a normal life event? How widespread and useful are protective factors, such as group support, that facilitate successful resolution of grief? How effective are mourning practices of various ethnic groups in preventing "bad grief", and might some of these practices be beneficial if taken up by other ethnic groups? How can the Western health practitioner know that a bereaved person from an unfamiliar cultural group is suffering "bad grief"? How acceptable is Western grief counseling to non-Western clients? (MEDLINE/AUTHOR)

2A.016
Eitinger, L. (1959). The incidence of mental disease among refugees in Norway. *Journal of Mental Science, 105*, 326-338.

Refugee/Ethnic Group: General

The author describes the refugee situation as it existed in Norway between 1946 and 1955. The refugees consisted of displaced persons who landed in Norway via a range of political and wartime avenues. In 1947 Norway began to accept immigrants, mainly Jewish, and later was one of the first countries to accept refugees with greater than average difficulties and ailments - the hard to place refugee. The article concludes with some remarks on the etiology of mental disorder among refugees. The article suggests an interplay between premorbid personality and external stress. (TAC)

2A.017
Eitinger, L. (1960). The symptomology of mental disease among refugees in Norway. *Journal of Mental Science, 106*, 947-966.

Refugee/Ethnic Group: European

The purpose of this study is to compare the symptomology presented by post World War II psychotic European refugees in Norway with the symptomology presented by a matched control group of Norwegian patients. The sample consisted of 95 refugee patients who were treated in Psychiatric departments in Norway during the 10 year period from January 1, 1946, to December 31, 1955. Symptoms found to be of special importance among refugee patients were: delusions of persecution, disturbances of consciousness, conversion symptoms, and ideas of jealousy. (SBIMHPIISF/TAC)

2A.018
Eitinger, L. (1981). Foreigners in our time: Historical survey on psychiatry's approach to migration and refugee status. In L. Eitinger & D. Schwarz (Eds.), *Strangers in the world*. (pp. 16-26). Bern, Switzerland: Hans Huber Publishers.

Refugee/Ethnic Group: General

Chapter summarizes the psychiatric view on migration from an historical viewpoint. Differences between voluntary migrants and refugees, in terms of adjustment and motivation, are explored. (POPLINE/TAC)

2A.019

Fakhr-el-Islam, M., & Hussein, A. Z. (1969). Evacuees presenting to the psychiatric clinic. *Journal of the Egyptian Medical Association*, *52*, 333-340.

Refugee/Ethnic Group: General

This study explores the possible psychiatric effects of warfare on civilians evacuated from the territories of military operations in Egypt from August to December 1967. A convenience sample of psychiatric patients--21 males and 19 females--voluntarily seeking psychiatric care at the Kasr-El-Aini Psychiatric Clinic in Cairo was interviewed following evacuation from the area of military operations. The patient characteristics studied included: occupation, marital status, interval between evacuation and presentations for psychiatric attention, and occurrence of previous psychiatric disorders. Also examined was the relation of the presenting disorder to the effects of bombing, separation from the original family, and the possibility of compensation. The findings showed that the bombing, separation from original families, and the difficulties in adaptation to the new socio-economic conditions were the main factors precipitating or exacerbating psychiatric disorders in most of those interviewed. (MEDLINE/TAC)

2A.020

Florin, F. (1975). Refugee students in the Netherlands. *Higher Education and Research in the Netherlands*, *19*, 19-23.

Refugee/Ethnic Group: Czech; Chilean

The refugee student population is a small group consisting of people who left their countries for political & cultural reasons & others who were invited by the Dutch government in response to more specific conditions, e.g., Czechs in 1968 & Chileans in 1973. Some of their problems & types of assistance available are described, including: (1) qualification recognition, (2) language difficulties, (3) finances, & (4) a shortage of admission places. Those who arrive at the invitation of the government are placed in reception centers. Some problems that arise with their isolation from the surrounding community are identified. The type of assistance needed for integration into the University community is often lacking. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2A.021
Fong, S. L. M., & Peskin, H. (1969). Sex-role strain and personality adjustment of China-born students in America: A pilot study. *Journal of Abnormal Psychology, 74*, 563-567.

Refugee/Ethnic Group: Chinese

The study presented here examines the nature of traditional value adjustments in naturalized students and students with visa status attending school in the San Francisco Bay area. Twenty males and 21 females (naturalized) were compared on the California Psychological Inventory with 23 males and 22 females on student visa status. 65% of the students sampled returned the CPI. The data indicate significant differences on 9 of the 18 CPI scales. The naturalized students appeared to be more self-confident, responsible, dependable and flexible in comparison to the visa students who seemed to be experiencing a degree of discomfort severe enough to impair their functioning in these areas. It is suggested that citizenship, or at least the prospect of it, encourages a personal commitment to the new society facilitating psychological well-being. (HAAPIMH/TAC EDITED)

2A.022
Garcia, M. (1983). The last days in Cuba: Personal accounts of the circumstances of the exit. *Migration Today, 11*, 13-22.

Refugee/Ethnic Group: Cuban

The 1980 Cuban Boatlift included refugees who were escaping on their own voluntary decision as well as those who were expelled by the government. This article presents an account of the personal circumstances of 180 Cuban refugees who were interviewed at a voluntary agency in Hudson County, New Jersey. The Cuban exodus followed the crashing of a bus full of army officers through the gates of the Peruvian Embassy in Havana and the subsequent conglomeration of 10,000 voluntary refugees at the Embassy. Castro responded by permitting, for a while at least, the refugees to leave the country, primarily by boat. Other groups of people--ex-political prisioners, convicts, other undesirables, and religious groups--were forced to leave by the government. A majority of those who were forced to leave left close family members behind, making their emotional adjustment to their new living situation much more difficult. (POPLINE/TAC)

2A.023
Grinberg, L., & Grinberg, R. (1984). A psychoanalytic study of migration: Its normal and pathological aspects. *Journal of the American Psychoanalytic Association, 32*, 13-38.

Refugee/Ethnic Group: General

Without maintaining that it always follows the same steps, we could say that the migratory process passes through several phases. The feelings that prevail are those of intense sorrow for all that has been abandoned or lost, fear of the unknown, and the very profound experiences of loneliness, privation, and helplessness. Paranoid, confusional, and depressive anxieties occupy the scene in turn. This stage may be followed or replaced by a manic state in which the immigrant minimizes the transcendental significance of the change in his life or, on the contrary, magnifies the advantages of the change and overvalues everything in the new situation, disdaining what has been lost. After a variable period of time, nostalgia appears, and sorrow for the lost world. The immigrant begins to recognize feelings previously dissociated or denied and becomes capable of "suffering" his pain ("growing pains") while, at the same time, he becomes more accessible to the slow and progressive incorporation of elements of the new culture. The interaction between his internal and external world becomes more fluid. Recovery of the pleasure of thinking and desiring and of the capacity for making plans for the future, in which the past is regarded as such and not as a "lost paradise" where one constantly longs to return. In this period, it could be considered that mourning for the country of origin has been worked through to the maximum extent possible, facilitating integration of the previous culture into the new culture, without the need to renounce the old. All of this promotes an enrichment of the ego and the consolidation of a more evolved sense of identity. (MEDLINE/AUTHOR)

2A.024

Guendelman, S. R. (1981). South American refugees: Stresses involved in relocating in the San Francisco Bay Area. *Migration Today, 9*, 19-25.

Refugee/Ethnic Group: South-American

A small number of refugees from Chile and Argentina settled along the West Coast of the U. S., primarily in Seattle and San Francisco, during the mid to late 1970's. A number of these refugees had been political prisoners in their own countries. For the majority of the refugees and their families, entry and adaptation to this country has been a slow and frustrating process. Two major reasons for this are cited: 1) The nature of the migration law is biased against victims fleeing right wing dictatorships, consequently restricting and delaying their entry; 2) The psychological and social problems encountered by the leftist refugees settling in a capitalist, individualistic society. Four stages of refugee adaptation have been identified as a result of observing recurring reaction patterns among the refugee groups. The first stage is a period of exhilaration, lasting two to three weeks. The second stage is one of distrust, lasting about five to six months. The third stage is marked by depression when one takes stock of all his or her losses; this stage can last from a year to a lifetime. Finally, the fourth stage is one of acculturation when the refugee develops new coping skills which enable increased self sufficiency. (POPLINE/TAC)

2A.025
Hitch, P. J., & Rack, P. H. (1980). Mental illness among Polish and Russian refugees in Bradford. *British Journal of Psychiatry, 137*, 206-211.

Refugee/Ethnic Group: Polish; Russian; Ukrainian

An epidemiological study of 1st admissions to psychiatric hospitals revealed that foreign-born people had substantially higher illness rates than native born. Comparing the major World War II refugee groups it was found that morbidity was higher among Poles than Ukrainians. It is suggested that the difference can be partly explained by the lower social cohesion of the former. The resulting marginal identity is insufficient protection against the normal crises and losses of later life. ((c)APA)

2A.026
Ho, M. K. (1976). Social work with Asian-Americans. *Social Casework, 57*, 195-201.

Refugee/Ethnic Group: Southeast-Asian; Asian-American

Salient cultural factors of first generation Asian American families are described. Factors include parental dominance, high degree of self control, the inhibition of strong feelings, social solidarity and subordination to the group, and fatalism. An Asian American client who seeks help from a social service agency risks family rejection. The above factors have numerous implications for service provision. Strict confidentiality needs to be adhered to. The client should be assured that seeking help is a strength. A directive approach with emphasis on humanistic attitudes and concrete service is more effective than other approaches. A modified approach to group therapy applying humanistic techniques is also suggested for family therapy. (NIMH)

2A.027
Hussain, M. F. (1984). Race related illness in Vietnamese refugees. *International Journal of Social Psychiatry, 30*, 153-156.

Refugee/Ethnic Group: Vietnamese

The author relates aspects of the mental health needs of Vietnamese refugees observed during a 6-wk assignment as medical practitioner and psychiatrist at a refugee center in the Philippines. Racism, the aftermath of war, leaving the homeland without preparation, perilous escapes, prolonged stays in camps, and moves to unsettled and uncertain futures contributed to the stress of these people. Psychiatric illnesses most frequently seen were depression, anxiety, psychosomatic disease, and psychosis; most could be related to the changes in life situation, losses (of business, property, occupation, and loved ones) and disruptions of family relationships. Racism and persecution played a part, especially for the "boat people." Special training is needed for mental health workers who attempt to treat the effects of racism, and prevention can be achieved by preserving ethnic group membership and reducing discrimination, hostility, and prejudice. Prevention also includes early detection of disease, early initiation of treatment, and reduction of residual disabilities after illness. ((c)APA)

2A.028

Ingall, M. A. (1984). Southeast Asian refugees of Rhode Island: Psychiatric problems, cultural factors, and nightmare death. *Rhode Island Medical Journal, 67*, 369-372.

Refugee/Ethnic Group: Southeast-Asian

The author describes three areas which complicate treatment of mental health problems among Southeast Asian refugees: 1) cultural factors, such as the stigma of mental illness and fear of hospitals; 2) refugee factors, such as the traumas of war, relocation, and survivor guilt; 3) language factors, such as difficulties using interpreters. Two case studies are given to illustrate "nightmare deaths." (MEDLINE/TAC)

2A.029

Jack, R. A., Nicassio, P. M., & West, W. S. (1984). Acute paranoid disorder in a Southeast Asian refugee. *Journal of Nervous & Mental Disease, 172*, 495-497.

Refugee/Ethnic Group: Vietnamese; Southeast-Asian

Presents the case of a 23-yr-old male Vietnamese refugee whose attempted suicide was precipitated by a rejection of his romantic advances by an American woman and teasing by fellow co-workers that he was a communist spy. Central to the development of paranoid delusions was the fact that he had been a member of the communist forces in Cambodia and feared deportation. Emigration and acculturative stressors were seen as contributing significantly to the S's paranoid disorders. ((c)APA)

2A.030
Krupinski, J. (1984). Changing patterns of migration to Australia and their influence on the health of migrants. *Social Science and Medicine, 18*, 927-937.

Refugee/Ethnic Group: General; Southeast-Asian

Whilst before World War II migration to Australia was almost entirely from the British Isles, over 60% of post-War II migrants came from other countries other than Britain. They arrived in Australia in distinct waves: Eastern European refugees were followed by migrants from Western Europe, who were later replaced by migrants from the Mediterranean Basin and finally by Asians, initially from the Indian subcontinent, afterwards from Lebanon and most recently from Indo-China. These patterns of migration were changing the numerical size, age distribution and length of residence in Australia of the different ethnic groups. The paper describes the influence of these changes on physical and mental health of the migrants. Physical morbidity was related to 'imported diseases', to the different physical and social environment and to differences and changes in eating and other habits. Psychiatric disorders were associated with traumatic experiences encountered prior to migration, and with stresses of migration and adjustment to the new country. Thus, in evaluating the health of immigrants, one has to take into account the sources from which the migrants were drawn, their situation in the host society, their numerical growth and age distribution, as well as acculturation to the country settlement. (MEDLINE/AUTHOR)

2A.031
Krupinski, J., Stoller A., & Wallace, L. (1973). Psychiatric disorders in East European refugees now in Australia. *Social Science & Medicine, 7*, 31-49.

Refugee/Ethnic Group: Jewish, Polish, Russian, Ukrainian

Intensively interviewed a sample of 209 Eastern European refugees who had arrived in Australia between 1945-1954, and who were patients of any facility of the Victorian mental health department during the period 1961-1968. War experiences, sociocultural backgrounds, family settings, educational and work histories, and adjustment problems in Australia were determined. A control sample of 138 nonpatient refugees was interviewed along the same lines. 3 groups of refugees were distinguished in terms of the severity of their war experiences: (a) Jewish; (b) Polish, Russian, and Ukrainian; and (c) all others. Ss were compared with each other, and their psychiatric morbidity was related to their war experiences and other factors. Each of these groups responded differently to the hardships they had endured. ((c)APA)

2A.032
Lega, L. I. (1983). The 1980 Cuban refugees: Some of their initial attitudes toward their future in a new society. *Migration Today, 11*, 23-26.

Refugee/Ethnic Group: Cuban

A random sample of 166 Cuban refugees completed questionnaires following their arrival in the U. S. The respondents had all registered with the International Rescue Committee, Catholic Charities, or Church World Service. Sixteen percent were women and 84 percent were men. Four main areas were explored in the questionnaire: 1) the refugees' greatest wishes and fears shortly after their arrival into the U.S., 2) the refugees' expectation of the way Cuban and non-Cuban U. S. citizens would greet them upon their arrival into this country, 3) the refugees' appraisal of the Cuban situation immediately prior to their departure regarding employment, housing, food, education, freedom, health, personal happiness, and anxiety level, and 4) the refugees' self-evaluation of their health, nervousness, hope, personal satisfaction, confidence, depression, anger, and sadness. (POPLINE/TAC)

2A.033
Lin, E. H., Carter, W. B., & Kleinman, A. M. (1985). An exploration of somatization among Asian refugees and immigrants in primary care. *American Journal of Public Health, 75*, 1080-1084.

Refugee/Ethnic Group: Chinese; Filipino; Vietnamese; Lao; Mien

The clinical records of Chinese, Filipino, Vietnamese, Laotian, and Mien patients in primary care were reviewed to determine the prevalence of somatization, its associated patient characteristics, and the manifested illness behavior. Patients in this study were generally poor, unemployed, and spoke little English. Somatization accounted for 35 per cent of illness visits. These visits were also more costly. Refugees had a higher rate of somatization (42.7 per cent) than immigrants (27.1 per cent). Although sociodemographic characteristics did not strongly differentiate patients with somatization from others, ethnicity and indicators of decreased resources such as large households with low income, households headed by single women, or a limited English proficiency were associated with somatization in certain ethnic groups. Somatization is thus an important health problem among Asian refugees and immigrants. (MEDLINE/AUTHOR)

2A.034
Lin, K. M. (1986). Psychopathology and social disruption in refugees. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 61-73). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

This chapter provides a review of recent studies on refugee mental health. It is divided into three sections. Various sources of stress in the refugee's life are examined in the first section, followed by a discussion of the common emotional and behavioral manifestations of distress in refugees. Finally, the prevalence and nature of major psychiatric syndromes among the refugee populations are examined in light of the DSM-III. The author concludes: 1) refugee experiences have a significant negative impact; 2) the impact is persistant; 3) there are similar sources of stress across divergent refugee groups; and 4) certain manifestations of distress may be more prevalent among people with refugee experiences. (TAC)

2A.035

Lin, K. M., Masuda, M., & Tazuma, L. (1982). Adaptational problems of Vietnamese refugees: III. Case studies in clinic and field: Adaptative and maladaptive. *Psychiatric Journal of the University of Ottawa*, 7, 173-183.

Refugee/Ethnic Group: Vietnamese

Presents clinical and field observations of the adaptational process and mental health problems of 115 Vietnamese refugees. Previous papers by the 1st author and colleagues described refugees' physical and mental health and life changes experienced during resettlement. Losses and "culture shock" often led to anxiety and depression, frequently expressed through somatization. Some Ss showed temporary paranoid or hysterical reactive psychoses, and marital conflict took place with increased frequency because of the excessive strain on the relationship and the need for constant readjustment to the new environment. Different patterns of acculturation were observed, with problems being encountered by those who were unable to bridge their traditional and adopted cultures. Ss with the greatest vulnerability were those with poor social support systems, who had suffered a greater degree of status inconsistency or extreme personal losses, or who had limited previous exposure to American culture. Successful adaptational strategies included the regrouping of family members or the creation of "pseudofamilies," absorption in work, and the development of an attitude of "fatalism" consistent with active coping. ((c)APA)

2A.036

Lin, K. M., Masuda, M., & Tazuma, L. (1982). Problems of Vietnamese refugees in the United States. In R. C. Nann (Ed.), *Uprooting and surviving: Adaptation and resettlement of migrant families and children.* (pp. 11-24). Dordrecht, Holland: D. Reidel.

Refugee/Ethnic Group: Vietnamese

This chapter is a reprint of reference number 2A.035. (TAC)

2A.037
Liu, W. T., & Murata, A. K. (1977). The Vietnamese in America: Refugees or immigrants? *Bridge: An Asian American Perspective*, *5*, 31-39.

Refugee/Ethnic Group: Vietnamese

This, the first in a series of five articles on the Vietnamese who have come to the U.S. since 1975, deals with the making of the refugees and describes how the negative motivations and regrets with which they have come may act as obstacles to their adjustment to American life. (NIUCSEAS)

2A.038
Liu, W., & Murata, A. (1978). The Vietnamese in America, Part IV: Mental health of Vietnamese refugees. *Bridge: An Asian American Perspective*, *6*, 44-49.

Refugee/Ethnic Group: Vietnamese

The experiences of Vietnamese refugees in transitional camps in the summer and fall of 1975 are described in this paper. The data show that the mental health needs of the refugees were not taken seriously and that it was assumed that assimilation would be problem-free. (NIUCSEAS)

2A.039
Marshal, E. (1981). The Hmong: Dying of culture shock? *Science*, *212*, 1008.

Refugee/Ethnic Group: Hmong; Southeast-Asian

Twenty Hmong and 6 non-Hmong Indochinese immigrants have died mysteriously since 1977. Fifteen have died since Jan. 1980. Victims were from 20-62 years of age, 95% male, and in good health; they died between 11pm and 8am. Death by stress or nightmare fright is one theory. CDC officers are examining the possibility that Hmong were weakened by chemical warfare agents, are congenitally susceptible to cardiac arrhythmia, or sleep apnea or may suffer from subtle infections that damage the heart. (MEDLINE/TAC)

2A.040
Mattson, R. A., & Dinh, K. D. (1978). Vietnamese refugee care. Psychiatric observations. *Minnesota Medicine*, *61*, 33-36.

Refugee/Ethnic Group: Vietnamese

Care of the Vietnamese refugee in the United States rapidly became a topic of medical, social, and political importance. The principal author is a psychiatrist who volunteered for general medical duty on Wake Island during July 1975 as a member of the United States Air Force Reserve in the "Operation New Life" program. He cites his observations, including the low incidence of alcoholism, drug abuse, and psychotic disorders. Based on the care of approximately 7,500 refugees, a number of cultural applications are described which should be useful in the future care of Indo-Chinese people, particularly those who have settled in the United States. (MEDLINE/AUTHOR)

2A.041
Mental health care system works to meet needs of Southeast Asian refugees. (1985). *Refugee Reports, 6*, 1-5.

Refugee/Ethnic Group: Southeast-Asian

This article discusses the extent of refugee mental and emotional problems in the U.S., quoting the study results of several researchers. In a recent survey of Southeast Asian refugees by the Indochinese Health and Adaptation Research Project of the University of California at San Diego, it was found that 44.7% of their random sample suffer from the most serious levels of psychological distress. Characteristics of refugees most at risk are included. Many refugees mask their depression with smiles, preferring not to discuss their emotions. Western approaches to psychiatry, with its confrontive, problem-solving methods, runs counter to the Southeast Asian cultural tendency to perceive illness as a "magical process" that does not respond to this approach. Patients and families are more likely to respond positively to concrete directives than to open-ended therapies, placing a greater emphasis on the patient developing a cognitive understanding of his situation than on getting him or her to express feelings. (TAC)

2A.042
Munger, R. G., & Hurlich, M. G. (1981). Hmong deaths. *Science, 213*, 952.

Refugee/Ethnic Group: Hmong

Comments on Eliot Marshall's article, "The Hmong: Dying of culture shock? Reference number 2A.039. (NIUCSEAS)

2A.043
Munoz, L. (1980). Exile as bereavement: Socio-psychological manifestations of Chilean exiles in Great Britain. *British Journal of Medicine and Psychology*, *53*, 227-232.

Refugee/Ethnic Group: Chilean

Political exiles present distinctive socio-psychological problems. The exile crisis is basically a rupture in the individual's cultural past, geographical environment, and attachment to his society and nation, and varies in intensity depending on the individual's past history and the strength of his socio-political commitment. This paper is based on a study of 25 Chilean political refugees of both sexes. The main results is that the psychodynamics of exile is akin to that of bereavement, and must be understood in terms of loss followed by stress caused by adaptation to the new environment. (MEDLINE/AUTHOR)

2A.044
Nguyen, S. D. (1982). Psychiatric and psychosomatic problems among Southeast Asian refugees. *Psychiatric Journal of the University of Ottawa*, *7*, 163-172.

Refugee/Ethnic Group: Southeast-Asian

Presents observations of a group of 56 Southeast Asian refugee patients (aged 13-73 yrs) who had resettled in Canada and who were referred to the author for psychiatric assessment and treatment. Depression and anxiety with a high prevalence of somatization were the most common problems. The Ss' adaptational difficulties are reviewed, and the cultural aspects of somatization are discussed. Cultural factors must be a critical variable in the process of designing a therapeutic and preventive approach for work with the Southeast Asian refugees. The focus of therapeutic intervention should be directed at resolving problems related to separation from family members and at easing the impact of culture shock and adjustment difficulties. ((c)APA)

2A.045
Nguyen, S. D. (1982). The psycho-social adjustment and the mental health needs of Southeast Asian refugees. *Psychiatric Journal of the University of Ottawa*, *7*, 26-35.

Refugee/Ethnic Group: Southeast-Asian

Since 1975, over one half million refugees from Southeast Asia have resettled in North America. While the majority settle successfully, there is growing evidence that a significant number are experiencing emotional distress due to the traumas of the war, lack of preparation before leaving their homelands, the perilous escape, the protracted stay in overcrowded, unsanitary refugee camps, and the transplantation into an alien culture and environment. The present study presents an overview of the problems and reviews studies on the mental health needs and psychosocial adjustment of the refugees in the U.S. and Canada. ((c)APA)

2A.046
Nguyen, S. D. (1984). The psycho-social adjustment and mental health needs of Southeast Asian refugees. *Canadian Journal of Psychiatric Nursing*, *25*, 6-8.

Refugee/Ethnic Group: Southeast-Asian

This article provides a brief overview of the resettlement process of the Vietnamese refugees in Canada. The refugees arrived in two waves; the first group is composed of predominantly urban, middle-class, educated Vietnamese; the second group represents a much broader socio-economic cross-section of Indochinese society. Factors in adjustment are discussed, along with the three stages of the adjustment process. Recommendations are presented for Canada's mental health system to meet the needs of the refugees and future immigrants. (MEDLINE/TAC)

2A.047
Nhu, T. T. (1976). Vietnam refugees: The trauma of exile. *Civil Rights Digest*, *9*, 59-62.

Refugee/Ethnic Group: Vietnamese

Article describes the plight of the refugees from transplant, enforced diaspora, to cultural shock. Vietnamese' sentimentality, love of family, interpersonal orientation and lack of aggression make them out of tune with American life. Their deep attachment to Vietnam and the thought of family members left behind produce enormous regret. In these agonizing circumstances, many try to rationalize their reasons for fleeing by exaggerating the corruption and economic hardship of the Vietnamese government. The author, however, proposes that "it is necessary to reconcile themselves to Vietnam, not to regard it as an ideological foe, but simply as one's country where one's family and ancestors still are." For those who cannot reconcile with the past, life will be full of doubts and anxieties. The author believes in the intelligence, resilience and enthusiasm of the Vietnamese and foresees a brighter future for the coming generations. It is hoped that the youngsters will not forget the integrity and beauty in traditions of the old country in their attempts to assimilate. (NIMH)

2A.048
Pedersen, S. (1949). Psychopathological reactions to extreme social displacements (Refugee Neuroses). *Psychoanalytic Review*, *36*, 344-354.

Refugee/Ethnic Group: General

The author discusses the psychopathological reactions of refugees which are a combination of war-neuroses and emigration mental illness. Drawing on the work of Stromgren, four case studies are given in which consciousness of personality is lost: 1) a slight paranoïa, 2) an acute paranoia and depression, 3) an affect-hallucination, 4) a psychoprovocated chronic schizophrene psychosis. All occurred in individuals with no previous psychopathology but who had experienced severe social traumata and deep personal conflicts. (TAC)

2A.049
Pinter, E. (1968). Psychiatric morbidity of Southern and Eastern European immigrants in Switzerland. *Social Psychiatry, 3*, 143-148.

Refugee/Ethnic Group: Italian; Hungarian

Describes some characteristic psychiatric syndromes in Italian workers and Hungarian refugees living in Switzerland. It is hypothesized that the variety of psychiatric conditions seen in immigrants is related to the diverse origins, the various motives for migration, and the different social roles adopted in the new homeland. The chief difference between the 2 groups lies in ego-structure. 2 frequently observed clinical syndromes, "hypochondriacal depression of emigration" (in Southerners) and "delusions of reference in an unfamiliar cultural environment" (in East Europeans), are discussed in more detail. ((c)APA)

2A.050
Rubinstein, D. (1976). Beyond the cultural barriers: Observations on emotional disorders among Cuban immigrants. *International Journal of Mental Health, 5*, 69-79.

Refugee/Ethnic Group: Cuban

Two case studies are presented as illustrative of certain aspects of emotional disorders among Cuban immigrants. Social and cultural factors are emphasized which tend to influence the disorder. The stresses of emigration and the loss of traditional ways of dealing with emotional difficulties are discussed, and the predominance of magic and religious/mystic phenomena in the manifestation of emotional disorders is noted. Despite the frequency of hallucinations and delusions, such disorders are more likely to be depressive rather than schizophrenic. (HHMHDB-UCLA)

2A.051

Rumbaut, R. G. (1985). Mental health and the refugee experience: A comparative study of Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 433-486). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Findings from a three year longitudinal study conducted at the Indochinese Health and Adaptation Research Project of the University of California, San Diego, on the psychological adaptation of the five major Indochines ethnic groups are reported. Social and demographic characteristics of the sample group are presented. Differences in levels of distress between the refugee population as a whole and the general population are documented, as well as significant differences among the five refugee groups. Some of the differences found between the five groups are "unhappiness," "depression," and "life satisfaction." One instrument used to measure affective and cognitive psychological adaptation was the Psychological Well-Being Scale. An open-ended qualitative interview was also conducted with a subsample of respondents. A second measure was a comparative Satisfaction with Life Areas Scale which focused on nine areas of everyday life: work, money, homelife, children, neighborhood, social contacts, health, religion, and leisure. The two areas of highest dissatisfaction were those of "work" and "money." Characteristics of refugees most at risk for mental health problems include: lack of education, low English language proficiency, welfare dependence, low income and unemployment, advanced age and widowhood, physical health problems and traumatic migration history. The second year of residence in the United States appears to be of significant importance in the onset of psychological problems. (TAC)

2A.052

Ryan, C. (1985). The name to go: Refugee mental health. *Passage: A Journal of Refugee Education, 1*, 76-78.

Refugee/Ethnic Group: Southeast-Asian

The purpose of this article is to provide teachers and health care workers in Southeast Asia and the U.S. with an introduction to basic mental health concepts in relation to the refugee experience. This article is based on Ryan's work for nine months as a psychiatric nurse with the American Refugee Committee in the Phanat Nikhom Refugee Camp. (AUTHOR)

2A.053

Salvendy, J. T. (1983). The mental health of immigrants: A reassessment of concepts. *Canada's Mental Health, 31*, 9-12,16.

Refugee/Ethnic Group: General

Reviews past and present views on links between immigration and mental illness. A prevailing major assumption has been that the process of immigration itself is so traumatic that it increases the likelihood of mental disorder. Early monofactorial hypotheses suggested that a higher rate of mental illness in immigrants was due to natural negative selection or that the immigrant's usual psychological defenses were rendered useless in a new environment. More contemporary views recognize that a number of factors may affect the mental health of immigrants. These factors may include the sociocultural gap between the society of origin and the host country, change in SES, preparation prior to immigration, mastery of the new language, and the existence of a large local ethnic community. The effects of these factors on the immigration of the family, the single young adult, the elderly, and refugees are discussed. ((c)APA)

2A.054

Suh, M. (1980). Psychiatric problems of immigrants and refugees. In E. L. Tepper (Ed.), *Southeast Asian exodus: From tradition to resettlement: Understanding refugees from Laos, Kampuchea, and Vietnam in Canada.* (pp. 207-220). Ottawa: The Canadian Asian Studies Association.

Refugee/Ethnic Group: Southeast-Asian; Lao; Cambodian; Vietnamese

This chapter is part of a book describing the Canadian experience with the resettlement of Southeast Asian refugees. It discusses immigration as a process of adaptation (both intrapersonal and interpersonal) and as a process of social change. Sections are included on mental illness and immigration, as well as on implications for resettlement and readjustment. Special consideration is given to the boat people in Canada as well as to the clinical problems of depression, anxiety, and major psychiatric illness. (TAC)

2A.055

Sumpter, E. A. (1980). 'Teach a man to fish' (Chinese proverb). *American Journal of Diseases of Children, 134*, 1025-1027.

Refugee/Ethnic Group: Cambodian; Southeast-Asian

The author discusses his experience working as a physician in a refugee camp in Thailand. After acute physical needs were met, many psychosomatic manifestations were seen which could not be effectively treated because of limited interpreter skills. The role of foreign caregivers in such situations and the need for them to understand the history of the refugees and the needs and problems faced by host countries are discussed. The author suggests a need for better preparation in the future to deal with more long-term disaster situations, particularly in providing rehabilitative skills. A willingness to share resources in such settings should be fostered in the medical educational system. (MEDLINE/TAC)

2A.056
Sutherland, J. E., Avant, R. F., Franz, W. B., Monzon, C. M., & Stark, N. M. (1983). Indochinese refugee health assessment and treatment. *Journal of Family Practice*, *16*, 61-67.

Refugee/Ethnic Group: Southeast-Asian

Reports health data from 426 Southeast Asian refugees who have resettled in the US. Health problems were primarily selected contagious illnesses and stress syndromes with functional complaints. Counseling was necessary in 17% of adults and 4.7% of children for psychosomatic problems or psychiatric disorders. Physicians should become aware of cultural attitudes, the Asian holistic approach to health, and treatment acceptance among Indochinese patients. ((c)APA)

2A.057
Tanna, V. L. (1974). Paranoid states: A selected review. *Comprehensive Psychiatry*, *15*, 453-70.

Refugee/Ethnic Group: General

This paper is an in-depth literature review of studies done on the various "paranoid states," defined here as conditions in which paranoid ideas occur. Included in the review are studies which have been done on refugee groups (in Norway following WWII, and on Hungarians in Britain following the Hungarian uprising in 1956) and immigrants (primarily in the U.S.). (MEDLINE/TAC)

2A.058
Thacore, V. R., Gupta, S. C., & Suraiya, M. (1975). Psychiatric morbidity in a north Indian community. *British Journal of Psychiatry*, *126*, 365-369.

Refugee/Ethnic Group: Indian

The purpose of this study was to obtain and compare the rates and patterns of mental disorders according to sociodemographic variables within a North Indian urban community. A house-to-house survey of 2,696 individuals was completed over a one-year period. The prevalence of mental illness was found to be at a rate of 82 per 1,000 population. The bulk of the patients consisted of those suffering from neurosis, alcoholism, mental retardation, and nocturnal enuresis. The prevalence rates for mental retardation and alcoholism were higher in the slum areas, whereas rates for functional psychosis, neurosis and nocturnal enuresis were relatively higher in the better-off communities. Higher rates of functional psychoses and neuroses, and of psychophysiological and transient situational disorders were found among those groups who had migrated to the community. However, when taken as a whole, the rates of mental illness among the local residents and the refugees was not significantly different. (MEDLINE/TAC)

2A.059

Tobin, J. J., & Friedman, J. (1983). Spirits, shamans, and nightmare death: Survivor stress in a Hmong refugee. *American Journal of Orthopsychiatry, 53*, 439-448.

Refugee/Ethnic Group: Hmong

Examined the interaction of war, flight, relocation, and survivor stress in a 22-yr-old Laotian Hmong soldier resettled in Chicago in 1980. S experienced trouble breathing and sleeping after being settled into his 2nd apartment in the US. A well-respected Hmong shaman was able to alleviate these experiences through chanting and ritualism. As a veteran of traumatic combat experiences and as a survivor of a holocaust, S suffered acute anxiety, depression, and mild paranoia, as well as survivor guilt. S blamed his sleeping and breathing disturbances on evil spirits that haunted him because he had not followed all of the mourning rituals required when his parents died. His reasoning was indicative of the guilt he felt in leaving behind his friends and relatives in Laos and of the mourning he felt at the loss of his parents, fellow soldiers, and land and culture. Of the 50,000 Hmong refugees in America, 25 young men have died mysteriously in their sleep. It is hypothesized that these deaths are due to (1) a form of unconscious suicide mediated by a loss of self-respect, self-control, and the will to live or (2) some other cause, the pathological effects of which are shortness of breath and nightmares. This study suggests that survivors of a cataclysmic event may be burdened by guilt to a greater degree than has previously been acknowledged. ((c)APA)

2A.060

Towbin, L. (1984). Manifestations of cultural transition presenting as health problems in Southeast Asian refugees. *Journal of the Arkansas Medical Society, 80*, 401-403.

Refugee/Ethnic Group: Southeast-Asian

Some generalizations about presenting problems of refugees from SE Asia. A list of common traumas of transition, brief description of beliefs about mental health in SE Asia, symptoms and general treatment recommendations are given. (MEDLINE/TAC)

2A.061
Tyhurst, L. (1977). Psychosocial first aid for refugees: An essay in social psychiatry. *Mental Health & Society, 4*, 319-343.

Refugee/Ethnic Group: General

Outlines an operational definition of the structure and natural history of the social situation of resettlement with reference to the working hypotheses of the Social Displacement Syndrome and the Psychosocial First Aid for Refugees Project. These were derived from clinical and field studies of 4 successive refugee groups in Canada over 27 yrs, with emphasis on the social dynamics of the situation from immediately upon resettlement to 1 yr after. In the early phase, the coexistence of personal and social disequilibrium in the refugees and among those who represent the institutions responsible for their management creates specific conditions; some enhance recovery or "repair" and some reinforce the disposition for lasting "social breakdown." Some generalizations concerning practical and theoretical work in social psychiatry are made. ((c)APA)

2A.062
Tyhurst, L. (1982). Coping with refugees. A Canadian experience: 1948-1981. *International Journal of Social Psychiatry, 28*, 105-109.

Refugee/Ethnic Group: General

Clinical and field studies of five successive refugee groups to Canada over the past 32 years are summarised. A consistent pattern of behaviour among refugees of different cultural backgrounds is described. The concept of Social Displacement Syndrome is reviewed and discussed from the perspective of the refugee recipient society. The early stages of the natural history of resettlement are seen as a series of predictable behaviour patterns of Refugees and Helpers. Some general principles are assigned for the study of refugee situation, of relevance to the development of specific personal and social support systems and to practical social psychiatric research. (MEDLINE/AUTHOR)

2A.063
Van Arsdale, P. W. & Pisarowicz, J. A. (Eds.). (1980). *Processes of transition: Vietnamese in Colorado.* Austin, TX: High Street Press.

Refugee/Ethnic Group: Vietnamese

The book's chapters are authored by specialists representing the fields of medical anthropology, psychology, social work, and nutrition, with one contributor being

Vietnamese. The focus is upon processes and problems of short-term adjustment and long-term adaptation to urban life in Colorado. Health and demographic factors are highlighted. (HB-SARS/AUTHOR)

2A.064

Van Deusen, J. M. (1982). Health/mental health studies of Indochinese refugees: A critical overview. *Medical Anthropology*, *6*, 231-252.

Refugee/Ethnic Group: Southeast-Asian

Author provides an overview of recent literature (through mid-1981) on the health and mental health experience of Southeast Asians. When almost 100 references are consolidated, the studies show substantial support for the general concept of involuntary migration as a stressful experience. Only a small percentage of these studies are considered to be of research quality, pointing to the need for additional comprehensive and well designed research contributions. Four general content areas in the literature have been identified and reviewed: conventional/traditional Southeast Asian medical systems; adjustment after resettlement in the U.S. (or other host countries); and service utilization and effectiveness. The implications of this overview are placed within the context of research recommendations from a consultation between Southeast Asian professionals and U.S. Public Health Service. Four major issues are identified. "The first addresses the general need for integration of existing resources (indigenous and American), application of existing knowledge, (pure and applied), and installation of mechanisms that will promote the development of linkages necessary to these tasks." The second identifies the need for longitudinal studies of successful and unsucessful adaptation. The third points out that research is needed to document the levels and types of problems and service needs of Southeast Asian refugees. The last issue is a recommendation regarding the need to validate and calibrate psychological testing techniques and instruments. The contributions that anthropologists are well suited to make are also discussed in the context of the research findings. (TAC)

2A.065

Verdonk, A. (1979). Migration and mental illness. *International Journal of Social Psychiatry*, *25*, 295-305.

Refugee/Ethnic Group: General

Several studies that examined the relationship between migration and mental illness are reviewed. In regard to the number of immigrants admitted to psychiatric hospitals, as compared with the number of native people, there are conflicting findings. The overall rate of first admission is sometimes higher and sometimes lower for immigrants. But the rate for admission with a specific diagnosis (schizophrenia, depression) is often higher for certain groups of immigrants than for the native people. Future research should take into account a more elaborate model of intervening variables between migration and mental illness, specify the type of migration (voluntary, involuntary, temporary), and work out a detailed concept of the cultural pattern of specific groups of immigrants. (SOCIAL WORK ABSTRACTS/AUTHOR/EDITED)

2A.066
Vignes, A. J., & Hall, R. C. (1979). Adjustment of a group of Vietnamese people to the United States. *American Journal of Psychiatry, 136*, 442-444.

Refugee/Ethnic Group: Vietnamese

Reports data obtained from 50 Vietnamese families living in Baton Rouge, Louisiana, by individual and group interview questionnaires. Interviews of all of the Vietnamese people who came to the local community mental health center were conducted, and the records of the center and other local social agencies were studied for sociodemographic data. A number of specific sociological stresses encountered by Vietnamese refugees were identified, but it is concluded that, basically, these people are adjusting well without losing their cultural identity. ((c)APA)

2A.067
Volkan, V. D. (1972). The birds of Cyprus: A psychopolitical observation. *American Journal of Psychotherapy, 26*, 378-383.

Refugee/Ethnic Group: Turk

Reports how a community of Cypriot Turks, confined in enclaves under refugee conditions during hostilities with Greece in the 1960s, displayed an exaggerated preoccupation with raising parakeets. The symbolism of the birds and the psychodynamics of the situation are discussed. It is concluded that regression occurred among the Turks, who tried to externalize their problems of political stress, unconsciously dramatizing the simile "free as a bird" as a safety valve for mass anxiety. ((c)APA)

2A.068
Volkan, V. D. (1977). Mourning and adaptation after a war. *American Journal of Psychotherapy, 31*, 561-569.

Refugee/Ethnic Group: Turk

This paper offers a study of the ways in which a war and its consequences affect psychologically those on the victorious side. The subjects of my study are the Turks of Cyprus; I will report on the psychological processes dominant among them--their attempts at mourning to achieve a new adaptation--during the year after the Turkish occupation of the northern part of the island in the summer of 1974. (MEDLINE/AUTHOR)

2A.069

Wen, C. P. (1974). Secular suicidal trend in postwar Japan and Taiwan: An examination of hypotheses. *International Journal of Social Psychiatry, 20*, 8-17.

Refugee/Ethnic Group: Japanese; Chinese

Marked increases in suicide among young adults (ages 15-24) occurred in Japan in the late 1950s and in Taiwan in the early 1960s. In peak years, suicide caused over half of all deaths in this age group. 2-3 yrs after the peak in each country, the rate rapidly declined. Social factors commonly related to suicide are examined as possible causes, but all fail to explain the historical timing or age-specificity of the suicide waves. It is hypothesized that stress caused by World War II in Japan (1942-1945) and the massive immigration of refugees from mainland China into Taiwan (1948-1951) strongly affected children and predisposed them to suicide as young adults, 13 yrs later. ((c)APA)

2A.070

Westermeyer, J. (1974). Alcoholism from the cross cultural perspective: A review and critique of clinical studies. *American Journal of Drug and Alcohol Abuse, 1*, 89-105.

Refugee/Ethnic Group: General

Cross cultural studies of alcoholism in the clinical setting have not been common. Most investigations of similarities and differences have been undertaken by nonclinical investigators (epidemiologists, anthropologists, sociologists). This paper examines the advantages and disadvantages of studies conducted in the clinical setting. (TAC)

2A.071

Westermeyer, J. (1981). Hmong deaths (Letter to the editor). *Science, 213*, 952.

Refugee/Ethnic Group: Hmong

In a letter, the author presents an issue related to Hmong death - the interpretation many Hmong ascribe to their dreams. (NIUCSEAS/TAC)

2A.072
Westermeyer, J. (1984). The role of ethnicity in substance abuse. *Advances in Alcohol and Substance Abuse, 4*, 9-18.

Refugee/Ethnic Group: General

Ethnicity can be a confusing concept. In part, it includes inherited characteristics such as race. Certain other aspects are learned, such as religion, language, attitudes, values, or customs. National origin of oneself or one's kin can be a component of ethnicity. Group affiliation and participation in certain ritual and ceremony are also involved in ethnicity. Substance abuse and dependence may undermine certain aspects of ethnicity and ethnic affiliations, by interfering with traditional values, attitudes, preferred behaviors, and interpersonal relationships. Substance abuse leads to the evolution of new values, attitudes and behaviors. These are remarkably similar (though not identical) from one chemically dependent person to another. In some cases the chemically dependent person remains a social isolate, while in other cases the individual joins with others to create a subculture in which the drug or alcohol centered values, attitudes and behaviors are shared. Treatment for alcoholism or drug abuse-if successful-produces crisis in ethnic identity for many people. Drug centered values and behaviors are directly confronted in the treatment process, and affiliation with alcohol or drug subcultures is specifically undermined. This may create a state of anomie-with its attendant confusion, anxiety, and loss. Out of this turmoil some individuals resume their original, childhood ethnic identities and affiliations (though often more accentuated than before). Others assume new ethnic identities or affiliations. (AUTHOR)

2A.073
Westermeyer, J. (1985). Mental health of Southeast Asian refugees: Observations over two decades from Laos and the United States. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 65-89). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian; Lao

Author presents personal observations of the Southeast Asian refugee population collected over twenty years. The breakdown in clans and families as they migrated from Laos to Thailand to the United States is discussed with the emphasis on the resulting mental health problems caused by this transition. Emigrations in Laos were conducted as intact villages and towns, with geographic and political relationships remaining constant. Continuation of social and occupational roles provided stability and control. This migratory pattern began to disintegrate in 1975, following the change in government. Arrival in the United States was characterized by separation of extended families, unfamiliar language and customs, and numerous environmental differences. An overview of early mental health interventions in the United States traces the historical roots of the current refugee mental health problems. Included are accounts of early efforts and problems and steps in establishing a mental health service for Indochinese refugees at the University of Minnesota. Areas of cross-cultural diagnosis and treatment which are in need of special attention are discussed. Lessons from the Indochinese experience, assessment of the current situation and further recommendations are presented. (TAC)

2A.074

Westermeyer, J. (1986). Migration and psychopathology. In C. L. Williams & J. Westermyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 39-59). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

Refugees are a subgroup of a larger class of individuals - migrants. The influence of migration on mental health and psychopathology has been studied quite extensively. The author provides a review of this literature beginning with a description of the types of psychopathology seen in migrants served in clinical or hospital settings. The most frequently studied disorders are schizophrenia, depression and other affective disorders, paranoia (including collective delusion, folie a famille, and mass suicide), substance abuse, and somatiform disorders. The author also describes studies on the general population of migrants. Different categories of migrants (i.e., students, workers, refugees, internal migrants, return migrants, social deviants) are considered in relation to their influence on psychopathology. Theories regarding the etiology of psychopathology among migrants are described and risk factors are identified. (TAC)

2A.075

Westermeyer, J. (in press). Psychiatric care of refugees. In R. H. Sandler (Ed.), *Medical Care of Refugees.* New York: Oxford University Press.

Refugee/Ethnic Group: General

Rates of psychiatric disorders among refugees are high when compared to other populations. The risk of major psychiatric disorders requiring clinical attention is highest in the first few years of the refugee experience, and then gradually decreases. Factors which increase the risk for developing psychiatric problems include: malnutrition and infectious diseases, loss of life and property, disruption of the refugee's social and political organization, prolonged residence in camps, loss of occupation and social roles, or relocation to a markedly different culture. Treatment methods and prevention strategies need to consider these factors. (TAC)

2A.076
Westermeyer, J., Bouafuely, M., & Vang, T. F. (1984). Hmong refugees in Minnesota: Sex roles and mental health. *Medicine and Anthropology, 8*, 229-245.

Refugee/Ethnic Group: Hmong

The etiology of sex-related differences in the development of certain psychiatric conditions is poorly understood. This study of 97 Hmong refugees living in Minnesota looks at the gender-related social roles in Hmong society and the change in these roles as the refugees adapt to life in America. Data collection was accomplished by: naturalistic observations of the Hmong in Laos and in the U.S., self-assessment of psychological symptom levels by using self-rating scales, and questionnaires regarding pre- and post-migration activities. Findings suggest that the initial adjustment problems are more significant for men than for women, but by two to three years post-migration men are experiencing fewer adaptation problems than are women. (MEDLINE/TAC)

2A.077
Westermeyer, J., Vang, T. F., & Lyfong, G. (1983). Hmong refugees in Minnesota. Characteristics and self perceptions. *Minnesota Medicine, 66*, 431-439.

Refugee/Ethnic Group: Hmong

Four years ago there was a fairly stable population of about 200 Hmong adults and children in Minnesota. A marked influx of Hmong refugees to Minnesota began about two years ago, and it is anticipated that their total numbers here will reach over 20,000 in the 1980s. The results of this survey of Hmong adults in Minnesota should prove useful to clinicians who encounter them as patients. (MEDLINE/AUTHOR)

2A.078
Westermeyer, J., Vang, T. F., & Neider, J. (1983). Refugees who do and do not seek psychiatric care: An analysis of premigratory and postmigratory characteristics. *Journal of Nervous & Mental Disease, 171*, 86-91.

Refugee/Ethnic Group: Hmong

Social psychiatric research can provide information about the role of interpersonal and societal factors in the genesis of psychiatric disorder. This discipline relies heavily on "experiments in nature" that expose a large number of people to a potentially pathological social stimulus. It also depends on the study of nonpatients to serve as a comparative group for patients. Both conditions are met in the present study of Hmong refugees from Indochina. While the population and the event are esoteric, their experiences of sudden sociocultural change, geographic migration, role discontinuity, identity crisis, and massive loss are common experiences among many psychiatric patients, regardless of their origin. The present prospective study of refugees to the US was undertaken among the Hmong population in Minnesota (n = 97; the majority aged 20-59 yrs) during 1977. Subsequently, 17 of this group became psychiatric patients over a 12-mo period. Pre- and postmigration factors associated with patient status are described, and hypotheses are offered regarding those postmigration experiences or social strategies that favored or prevented psychiatric status. ((c)APA)

2A.079

Yamamoto, J., Lam, J., Fung, D., Tan, F., & Iga, M. (1977). Chinese-speaking Vietnamese refugees in Los Angeles: A preliminary investigation. In E. F. Foulks, R. M. Wintrob, J. Westermeyer, & A. R. Favazza (Eds.), *Current perspectives in cultural psychiatry.* (pp. 113-118). New York: Spectrum Publications.

Refugee/Ethnic Group: Vietnamese-Chinese

Analysis of a series of interviews with fourteen Chinese-speaking families from Vietnam was conducted during the first year following the 1975 exodus. Most of the families shared similar problems relating to sponsorship, English language competence, employment, and a general disappointment with the local Asian community. Half of the families still had children, siblings, or parents remaining in Vietnam or Taiwan. Major finding was a statistically significant correlation between unemployment and mental depression. (NIUCSEAS)

2A. Typical or Common Mental Health Problems ...

The following references (identified by their bibliography number) also contain some information relevant to category 2A:

1A.001, 1A.011, 1A.014, 1A.029, 1A.038, 1A.039, 1A.042, 1A.043, 1A.044, 1A.045, 1A.046, 1A.047, 1A.049, 1A.050, 1A.051, 1A.052, 1A.053, 1A.056, 1A.057, 1A.058, 1A.060, 1A.061, 1A.062, 1A.063, 1A.064, 1A.065, 1A.066

1B.012, 1B.019, 1B.024, 1B.037, 1B.038, 1B.039, 1B.042, 1B.043, 1B.044

1C.001, 1C.011, 1C.036, 1C.039, 1C.040, 1C.044

1D.012, 1D.014, 1D.020, 1D.027, 1D.035, 1D.036, 1D.044, 1D.047, 1D.048, 1D.053

1E.003, 1E.004, 1E.005, 1E.008, 1E.009, 1E.012, 1E.013, 1E.016, 1E.017, 1E.019, 1E.021, 1E.022, 1E.023, 1E.026, 1E.027, 1E.028, 1E.033, 1E.037, 1E.038, 1E.040, 1E.041, 1E.043, 1E.044, 1E.045

2B.001, 2B.002, 2B.005, 2B.027, 2B.030, 2B.031, 2B.032, 2B.037, 2B.039, 2B.040, 2B.048, 2B.049, 2B.053, 2B.059, 2B.061, 2B.062, 2B.063

2C.002

2D.001, 2D.009, 2D.013, 2D.018, 2D.020, 2D.030, 2D.031, 2D.034, 2D.038, 2D.039, 2D.042, 2D.043, 2D.045, 2D.046, 2D.047, 2D.048

2E.014

2F.013, 2F.014, 2F.021, 2F.022, 2F.025, 2F.026

2G.005

3A.002, 3A.005, 3A.006, 3A.009, 3A.012, 3A.013, 3A.014, 3A.015, 3A.017, 3A.024, 3A.031, 3A.032, 3A.038, 3A.044, 3A.046, 3A.048, 3A.049, 3A.053

3B.005

3C.002, 3C.003

3E.001, 3E.002, 3E.003, 3E.004, 3E.005, 3E.007, 3E.008, 3E.009, 3E.010, 3E.011, 3E.013

The reader is advised to refer to the above references for more information regarding **Typical or Common Mental Health Problems, Disorders, or Issues for Refugees.**

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2B. Assessment and Diagnosis ...

2B.001
Adams, P. L., & Horovitz, J. H. (1980). Psychopathology and fatherlessness in poor boys. *Child Psychiatry & Human Development, 10,* 135-143.

Refugee/Ethnic Group: Cuban; Black

In this study, the sample (of 201 US blacks and Cuban refugees of white derivation) was controlled for the family's economic class position, ethnicity, place of residence, and children's age, gender, and ordinal position; Ss were also matched with a control group of "fathered" children. Instruments used were a mini-MMPI (76 items) and the Louisville Aggression Survey Schedule-1. All of the data obtained were supplied by the mothers--about both themselves and their firstborn male child. No positive association between the boys' psychopathology and their fatherlessness was found. Moreover, the data indicate that poverty exerted a leveling influence that overrode the differentiating characteristics of ethnic and age grouping, family structure, father presence or absence, and linguistic and cultural heritages. ((c)APA)

2B.002
Alley, J. C. (1982). Life-threatening indicators among the Indochinese refugees. *Suicide & Life-Threatening Behavior, 12,* 46-51.

Refugee/Ethnic Group: Southeast-Asian

The turmoil of war, the risking of one's life, and the forced separation of families and relocation into the American culture have drastically changed the lives of the Indochinese. The emotional scars imprinted into the minds of these people do not disappear on arrival into a neutral country. Rather, the psychological problems can show themselves as suicidal preoccupation, or attempts. The present study stresses related variables observed in Indochinese people contemplating suicide. Of 4,192 Ss, ten 17-52 yr old suicidally inclined Ss were identified. Findings reveal that multiple determinants were operating conjointly in creating the high risk of any particular refugee in relation to suicide. ((c)APA)

2B.003
Ayabe, H. I., & Santo, S. (1972). Conceptual tempo and the Oriental American. *Journal of Psychology, 81,* 121-123.

Refugee/Ethnic Group: Japanese; Chinese; Asian-American; Pacific-Islander

Two groups, one with 30 second-graders (15 M, 15 F) of Japanese or Chinese origin and the other with 30 second-graders (15 M, 15 F) of Filipino, Hawaiian, Samoan, or Portuguese extraction were compared on the Matching Families

Figures Test, Kant's measure of reflection impulsivity. Subjects from each group were randomly assigned to either a fast, slow, or control testing condition. It was hypothesized that the Japanese-Chinese group would make fewer errors and manifest greater response latencies due to the cultural emphasis on values of perseverance and reservedness. Although there was no difference between the groups for all three testing conditions combined (no group main effect), the Japanese-Chinese group made significantly fewer errors than the other group in the fast condition. The results suggest that the superior performance by Japanese or Chinese groups compared with other racial groups on timed exams such as standard achievement tests may be more attributable to the time tests variable than to skill per se. (HAAPIMH)

2B.004

Backman, M. E. (1972). Patterns of mental abilities: Ethnic, socioeconomic, and sex differences. *American Educational Research Journal, 9*, 1-12.

Refugee/Ethnic Group: Jewish; Asian-American; Black; White

An inquiry into the relationship of sex, SES and ethnicity to patterns of mental abilities among adolescents is detailed. Ss were 2,925 high school senior participants in Project Talent, a study on 4.5% of U.S. students in grades 1-12, spring 1960. Approximately 100,000 students in each grade were given a two-day battery of tests and inventories gathering information on their interests, abilities, and backgrounds. The research sample was composed of 1,236 Jewish-whites, 1,051 non-Jewish-whites, 488 blacks, and 150 Asian Americans. SES was defined by the Project Talent Socioeconomic Environment Index. The six mental ability factors examined were: (a) verbal knowledge, (b) English grammar and language usage, (c) high school mathematics with a minimum of computation, (d) visual reasoning with spatial forms, (e) perceptual speed and accuracy - visual motor coordination under speeded conditions, and (f) memory - short-term recall of verbal symbols. Differences in the shapes of the patterns of mental abilities were reflected by the interactions of ethnicity, SES, and sex with mental ability factors in the 4 x 2 x 2 x 6 fixed effects Analysis of Variance. Sex accounted for a substantially greater proportion (69%) of the total variance than did either ethnicity (13%) or SES (2%). Females achieved higher mean scores on ENG, PSA, and MEM; males received higher scores on VKN, MAT, and VIS. A Scheffe test revealed that the average level of the pattern of mental abilities of the blacks (47.9) was significantly lower ($P < .01$) than that of Jewish-whites (51.1), non-Jewish-whites (51.2), and AA (52.0). Males and females within the respective racial groups demonstrated patterns of mental abilities characteristic of their sex. If a broader range of SES had been included, a stronger correlation between SES and patterns of mental abilities may have been established. (HAAPIMH)

2B.005

Berry, J. W., & Blondel, T. (1982). Psychological adaptation of Vietnamese refugees in Canada. *Canadian Journal of Community Mental Health, 1*, 81-88.

Refugee/Ethnic Group: Vietnamese

The influx of Vietnamese refugees to Canada has raised questions regarding their resettlement and adaptation. This study examines the psychological adaptation of 72 adult Vietnamese refugees in the City of Kingston, Ontario, by means of an interview and questionnaire consisting of 12 demographic questions and the psychological section of the Cornell Medical Index (CMI), with some modifications. The psychological adaptation of the refugees in this study is compared to other Vietnamese refugee groups, to non-refugee groups undergoing culture change, and to non-refugee groups undergoing no major culture change: all of the groups have been similarly assessed by a modified form of the CMI. It is found that the Vietnamese refugees in this study exhibit high levels of psychological dysfunction, as do the other Vietnamese refugee groups and non-refugee groups undergoing cultural change, whereas the non-refugees undergoing relatively little cultural change exhibit lower levels of psychological dysfunction. Of the 12 independent variables (age, sex, religion, marital status, previous and current education, previous and current employment, a command of the English, French and Chinese languages and sponsorship) examined for their possible effect, language is found to be the major significant variable in predicting good psychological adaptation; this suggests the importance of an established ethnic community in the process of adaptation of refugees. (AUTHOR)

2B.006

Black, A. D., & Grinder, R. E. (1959). Reliability of the Ammons FRPV Test and the relationship between two measures of verbal comprehension for a Japanese-American sample. *Psychological Reports*, *5*, 261-263.

Refugee/Ethnic Group: Japanese

The study was designed to evaluate the reliability of the Full-Range Picture Vocabulary Test (FRPV) for a sample of JA freshmen and to investigate the relationship between Forms A and B of the FRPV and the ETS Cooperative English Tests. Sansei at the University of Hawaii were the Ss - 25 males and 52 females. Forty Ss reported they were bilingual and 37 Ss were monolingual. Although some research suggests bilingualism may affect language development during childhood, the authors suggest that such influence may have little effect by late adolescence. (HAAPIMH)

2B.007
Boreham, J. (1968). An atypical depressive record. *British Journal of Projective Psychology & Personality Study, 13*, 3-6.

Refugee/Ethnic Group: Czech

Describes the case of a 73-yr-old Czechoslovakian refugee who developed a neurotic depression after his escape to England in 1939. During 25 years of psychiatric care, there was a worsening in his ability to play a part in the lives around him and a loss of belief in himself, e.g., loss of appetite was accompanied by a feeling that he was unworthy of proper food. The Rorschach test shows a lively personality suffering from a persecutory anxiety, with unconscious content concerning latent homosexuality and castration fantasies. The diagnostic picture comes into the general area of a hysterical anxiety state. Because of the atypicality of the Rorschach record, a clear diagnosis is difficult. The diagnosis is that "of a depressive reaction, concerning unconscious guilt, against a background of hysterical character structure." The depression is reactive to environmental stress and results in the impoverishment of a basically lively personality. ((c)APA)

2B.008
Boxer, P. A., & Garvey, J. T. (1985). Psychiatric diagnoses of Cuban refugees in the United States: Findings of medical review boards. *American Journal of Psychiatry, 142*, 86-89.

Refugee/Ethnic Group: Cuban

Examined the cases of 109 Cuban refugees who had appealed psychiatric diagnoses precluding their admission to the US to assess the reproducibility of psychiatric diagnoses made in immigration proceedings. Medical review boards upheld only 23 of 55 initial diagnoses of antisocial personality disorder but affirmed exclusionary certifications in 39 of the 54 other cases. Failure to sustain a high proportion of diagnoses of antisocial personality disorder may reflect interviewer biases or cross-cultural inappropriateness of diagnostic criteria. ((c)APA)

2B.009
Burch, E. A., & Powell, C. H. (1980). The psychiatric assessment of a Vietnamese refugee through art. *American Journal of Psychiatry, 137*, 236-237.

Refugee/Ethnic Group: Vietnamese

Presents the case of an 18-yr-old South Vietnamese woman to illustrate the applications of art to the management of patients with cross-cultural language difficulties. A determination was made, based on the woman's art work, that she was mildly mentally retarded. Her art work matured rapidly from that of a 4-7 yr old to that of an adolescent in less than 3 mos. The experience with the interpreter in evaluating the patient for psychopathology resembled that reported by L. R. Marcos. (See ref. number 2B.036). ((c)APA)

2B.010
Caudill, W., & DeVos, G. (1956). Achievement, culture, and personality: The case of the Japanese-Americans. *American Anthropologist*, *58*, 1102-1126.

Refugee/Ethnic Group: Japanese; White

Between 1947 and 1950 an interdisciplinary team of anthropologists, sociologists, and psychologists from the University of Chicago made an extensive exploration into the achievement orientation of JA relocated in the Chicago area. The data were comprised of: a) interview schedules obtained from a random sample of 342 JA families representing 1,022 persons; b) evaluations by employers of JA in 79 firms; c) summaries of all JA cases handled by Chicago social workers between 1942 and 1948; d) investigation of the child-rearing practices of 50 Nisei mothers; e) the collection and study of 150 Rorschach and 100 TAT records; and f) 53 psychiatric interviews with Issei and Nisei. Comprehensive demographic statistics including JA educational and occupational levels during the postwar period are presented in the analysis of remarkable socioeconomic accomplishment despite discrimination and alien values presumed to be maladaptive. Significant compatibility between the Japanese and American white middle-class value system was then hypothesized, although the psychological motivation behind ostensibly similar behaviors was acknowledged to be possibly different. Cultural divergencies along other dimensions are discussed. The authors conclude prediction of achievement for the ethnic group must focus on individual psychodynamic and genetic factors, overt and implicit cultural patterns, and interpersonal relations in both domestic and work settings. (HAAPIMH)

2B.011
Chin, J. L. (1983). Diagnostic considerations in working with Asian Americans. *Journal of Orthopsychiatry*, *53*, 100-109.

Refugee/Ethnic Group: Chinese; Southeast-Asian; White

Although the article focuses on Chinese-Americans the recommendations can also apply to Indochinese. The author states that Asian Americans are generally diagnosed through the use of psychological tests and clinical assessments which are based on differences observed against white middle class norms. This often leads to interpretations which are negative. In particular, intelligence tests tend to underestimate the intellectual potential of Asian Americans. The author recommends the use of operationally defined behavior, rather than inferred traits, to achieve diagnosis. The uniqueness of the individual and an awareness of the adjustment issues and needs of immigrant families should also be considered. Also, variations in themes on projectives should not automatically be considered as psychopathology but viewed in the context of the cultural world the individual lives in. (NIMH)

2B.012

Cieri, A. F., Hernandez, J. M., & Hernandez-Perez, C. (1982). The culturally different: A child study team method of working with Hispanic children. *School Social Work Journal*, *7*, 32-41.

Refugee/Ethnic Group: Cuban

In Union City, New Jersey, the child study team, which consists of the social worker, the psychologist, and the learning disabilities teacher-consultant, uses a multidisciplinary approach to identify, evaluate, and plan suitable educational programs that are appropriate for children experiencing difficulty in learning. In working with recently arrived Cuban refugees, the team must keep the following in mind while conducting assessments: 1) The Life History Grid is useful in collecting data on familial and developmental milestones, 2) religious factors may influence a family's acceptance of therapy-related diagnosis, 3) an understanding of the familial structure is essential, and 4) similarities among Hispanics can be used productively in the assessment process. At a scheduled conference, members of the team, along with the parents, teachers, and other specialists, meet to discuss the basic educational plan. At this point they agree on an appropriate classification. After developing the basic plan, the team coordinates the development of the instructional guide in cooperation with the staff members who are responsible for the youngster's program. The guide includes the scheduled time the child is to be served by specialists. Instructional strategies are geared to meet the student's needs, and techniques and activities are developed to support the personal and social development of the child and to familiarize the student with other cultures. (SOCIAL WORK ABSTRACTS/AUTHOR/EDITED)

2B.013

Dana, R. H. (1959). American culture and Chinese personality. *Psychological Newsletter*, *10*, 314-321.

Refugee/Ethnic Group: Chinese

A background questionnaire, a short-form Wechsler-Bellevue, and selected Rorschach and TAT cards were administered to 20 (15 M, 5 F) China-born Chinese students attending a U.S. university. The Ss, aged 18-33 (average 26), had lived in the U.S. less than 5 years. Test results suggest that projective techniques may be cross-culturally applicable given cetain qualifications. Gross similarity to published literature is observed with specific differences emerging in type of Rorschach human movement, role-taking, and control functions. Group performance on the TAT reveals a widespread history of personal trauma resulting in fixation on primary or ultimate goals, survival, and immediate organismic needs. The use of Chinese examiners and matched groups of American Ss controls would by helpful in establishing unique cultural factors involved in test responses. (HAAPIMH/TAC EDITED)

2B.014

DeFries, J. C., Vandenberg, S. G., McClearn, G. E., Kuse, A. R., Wilson, J. R., Ashton, G. C., & Johnson, R. C. (1974). Near identity of cognitive structure in two ethnic groups. *Science*, *183*, 338-339.

Refugee/Ethnic Group: Japanese; European

The purpose of this study is to evaluate the genetic and environmental determinants of cognitive performance among Americans of Japanese or European ancestry. The project is a large-scale family study including 262 Americans of Japanese extraction and 782 persons of European extraction. Fifteen control variables were drawn from various environmental indices, blood group and enzyme systems, and dermatoglyphics for purposes of gathering data. Results indicated that on factors such as spatial visualization, verbal perceptual speed, accuracy, and visual memory, the two groups are highly similar, suggesting a fundamentally identical structure of intellect. Whether this isomorphism is primarily cultural or connatural remains to be researched. (HAAPIMH/TAC EDITED)

2B.015

DeVos, G. (1955). A quantitative Rorschach assessment of maladjustment and rigidity in acculturating Japanese Americans. *Genetic Psychology Monographs*, *52*, 51-87.

Refugee/Ethnic Group: Japanese

An assessment of psychic maturity was made in terms of maladjustment and rigidity. The Maladjustment Scale consists of various interrelated indices of ego dysfunction reflecting individual deviation from optimal clinical standards. The Rigidity Scale measures the tendency to use inflexible perceptual and behavioral patterns as a means of avoiding anxiety. Both scales were developed by Seymour Fisher. The Japanese group had 50 Issei, 60 Nisei, and 30 Kibei. In the

American group there were representative samples of 60 normals, 30 neurotics, and 30 schizophrenics as clinically defined by Beck. The findings supported the hypothesis that differences among the Japanese-American groups would occur according to the degree of acculturation. The relative easy acculturation of the Nisei compared to other minority goups is due to the underlying compatibility between the value systems of Old Japan and middle-class America. (HAAPIMH/TAC EDITED)

2B.016

Diamond, M. J., & Bond, M. H. (1974). The acceptance of "Barnum" personality interpretations by Japanese, Japanese-Americans, and Caucasian-American students. *Journal of Cross-Cultural Psychology, 5*, 228-235.

Refugee/Ethnic Group: Japanese; White

Japanese, JA, and WA students participated in an experiment on the Barnum Effect (i.e., the degree to which students will accept vague and bogus personality interpretations as being an accurate representation of their personalty). It was hypothesized that all students would show the Barnum Effect and that J and JA would show greater compliance than WA who tend to be less obedient to authority. All subjects were given a Rorschach and separately given identical personality descriptions. The subjects were told that the descriptions were based upon their Rorschach results. A followup questionnaire indicated that, while all students believed that the descriptions were accurate, J and JA were more likely to be compliant or accepting of the descriptions than were WA. (HAAPIMH/TAC EDITED)

2B.017

Dixon, P. W., Fukuda, N. K., & Berens, A. E. (1968). The influence of ethnic grouping on SCAT, teachers' ratings, and rank in high school. *Journal of Social Psychology, 75*, 285-286.

Refugee/Ethnic Group: Japanese

Previous research suggests Hawaiian Japanese are higher in need for achievement and submission to authority than other groups (Cosmopolitans). Japanese females have also been found to possess a greater degree of clinical anxiety. The present study utilizes three measures to determine the extent to which these personality findings are manifested in high school performance: a) teacher's evaluation of student reliability, leadership, cooperation, initiative, industry, accuracy, self-confidence, and punctuality; b) class rank upon graduation; and c) verbal and quantitative scores on the School and College Ability Tests. Japanese scored significantly higher on all three measures than Cosmopolitans. Japanese females scored higher on teachers' ratings and rank in class. (HAAPIMH/TAC EDITED)

2B.018

Eisenman, R., & Hajcak, F. J. (1972). Use and interpretation of the Thematic Apperception Test: A case of a 'well' sibling in a 'sick' family. *Training School Bulletin, 69*, 13-19.

Refugee/Ethnic Group: Hungarian

Describes the use and interpretation of the TAT by a card-by-card interpretation of the protocol of a 15-yr-old "well" boy in the family of Hungarian refugees with a "sick" sibling. The interpretations highlight certain psychological problems that this "well" S has, and illustrate how the TAT may be used clinically to obtain hypotheses which are then followed up. In addition to sexual concerns, the S revealed involvement in a burglary episode; this area was brought out as a result of his response to the TAT. ((c)APA)

2B.019

Enright, J. B., & Jaeckle, W. R. (1963). Psychiatric symptoms and diagnosis in two subcultures. *International Journal of Social Psychiatry, 9*, 12-17.

Refugee/Ethnic Group: Japanese; Filipino

It is hypothesized that obvious consistent symptomatic differences exist between Japanese and Filipino patients, despite identical classification by the American Psychiatric Association system. Ss were all male Filipino and Japanese first admissions to Hawaii State Hospital for a 6-year period beginning July 1, 1954. Sixty-five Filipinos and 58 Japanese were involved, all diagnosed as paranoid schizophrenic. Results indicate that the Japanese experienced relatively more depression, withdrawal from daily activity, and disturbance of thinking or ideas of reference. The Japanese were also less inclined to exhibit delusions of persecution and overt signs of disturbed behavior. The Japanese on balance were more inhibited than the Filipino patients, tending more toward autoplastic behavior. Both groups were equal in frequency of hostility. The upshot of the study is that reliance on Kraepelinian diagnostic categories developed in a Western culture concealed striking and significant symptomatic differences between two non-Western ethnic groups identically classified. (HAAPIMH/TAC EDITED)

2B.020

Ervin, S. M. (1964). Language and TAT content in bilinguals. *Journal of Abnormal and Social Psychology, 68*, 500-507.

Refugee/Ethnic Group: French

177

Adult French bilinguals told TAT stories on 2 different occasions for the same pictures, in French at one session, in English at the other. Predictions derived from studies of child-rearing practices and values in the 2 countries were made regarding expected content differences in the 2 languages. Of 9 predicted content differences, 3 were statistically significant. Achievement themes were more common in English in the women Ss. Verbal aggression against age peers, and autonomy or withdrawal from others were more common themes in the French stories. In these respects, content shifted with language, for the same individual at 2 different sessions. (TAC/AUTHOR)

2B.021

Eyton, J., & Neuwirth, G. (1984). Cross-cultural validity: Ethnocentrism in health studies with special reference to the Vietnamese. *Social Science and Medicine, 18*, 447-453.

Refugee/Ethnic Group: Vietnamese

The paper presents a methodological analysis of some recent studies concerned with health and socio-cultural adaptational problems of Vietnamese refugees. Using certain methodological rules, developed by social scientists for comparative research, such as conceptual equivalence or equivalence of measures, the claim of the studies to have employed cross-culturally valid instruments is examined. Since none of the studies have sought to achieve conceptual equivalence of their comparative concepts it is shown that several salient cultural differences in beliefs regarding the conception and treatment of illness among Vietnamese are over-looked. The studies only use indicators derived from, and based on, American samples and do not take into account culturally conditioned responses. Thus it is shown in some detail that the claim of cross-cultural validity should be seriously questioned as far as the Social Readjustment Rating Questionnaire and the Cornell Medical Index are concerned. The social class differences between 1975 and 1979 Vietnamese refugees are discussed in order to caution the reader that findings based on 1975 refugees will not apply to 1979 refugees. The paper concludes with the suggestion that different research strategies are required namely that open-ended interviews be used in societies of which our knowledge concerning salient cultural differences is fragmentary. (MEDLINE/AUTHOR)

2B.022

Gerber, B. M. (1980). Interpreting for hearing-impaired patients in mental health settings. *American Journal of Orthopsychiatry, 50*, 722-724.

Refugee/Ethnic Group: General

Although this article serves as a guide for mental health professionals working with the deaf, there are some suggestions relevant to those working with patients who speak a foreign language. This author discusses both physical issues (e.g., the setting) and psychological issues (e.g., language skills of the deaf) relevant to working with an interpreter. (TAC)

2B.023
Gordon, L. V., & Medland, F. F. (1965). Values associated with intentions of Cuban refugees to remain in the U.S. Army. *Psychological Reports, 17*, 15-18.

Refugee/Ethnic Group: Cuban

Cuban officers and enlisted men, serving for brief periods in the U.S. Army, were administered the Survey of Interpersonal Values during, respectively, their 10th and 5th weeks in the service. Several weeks later, toward the end of their periods of obligated service, they were asked to specify whether they wished to remain in the Army. For both groups, Conformity and Benevolence were positively associated and Independence was negatively associated with desire to stay in the Army. Results have implications for the prediction of military career orientation and possibly industrial turnover. (MEDLINE/AUTHOR)

2B.024
Hodge, W. H. (1979). *Description of Indochinese assessment and planning package*. Oshkosh, WI: Institute of Human Design, University of Wisconsin-Oshkosh.

Refugee/Ethnic Group: Southeast-Asian

A guideline of an assessment procedure at the interview is presented. This is to help service providers organize information from the client, understand the presenting problem and work out a solution. Steps of assessment are: 1) exploration of the circumstances leading to the clients contact, 2) preliminary evaluation of the client's problems, 3) physical assessment, and 4) social and cultural assessment (i.e., observation and analysis of the individual, family, community, national, and international levels of activity). Author also provides two hypothetical cases of the individual and family to set examples for treatment planning. (NIMH)

2B.025
Hsieh, T. T. Y., Shybut, J., & Lotsof, E. J. (1969). Internal versus external control and ethnic group membership: A cross-cultural comparison. *Journal of Consulting and Clinical Psychology, 33*, 122-124.

Refugee/Ethnic Group: Chinese; Chinese-American; White

Chinese, Chinese-American, and white-American students were compared in their responses to Rotter's Internal-External Control Scale for ethnic differences in externality. Subject breakdown: 108 F and 131 M white-American, 42 F and 33 M Chinese-American, 102 F and 241 M Hong Kong-Chinese. All were high school students roughly 17 years of age, from families of similar economic and educational background. The mean WA score was 8.58 and the mean Hong Kong-Chinese score was 12.07, the group difference achieving significance at the .001 level. Americans of Chinese ancestry (mean score = 9.79) were also significantly more internal than the Hong Kong group, but less than white Ss, thus supporting the acculturation hypothesis that ethnic group membership is highly related to locus of control. (HAAPIMH/TAC EDITED)

2B.026

Irwin, D. A., & Madden, C. (1986). A psycho-educational assessment procedure for Southeast Asian refugee students. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 189-204). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Southeast-Asian; Hmong

This chapter describes a psycho-educational testing battery developed by the Institute of Human Design in Winnebago, Wisconsin, for Southeast Asian children. The testing battery consists of the Ravens Coloured or Standard Progressive Matrices and the Mazes, Coding, and Block Design subtests from the Wechsler Intelligence Scale for Children - Revised administered in the child's language by a trained Southeast Asian paraprofessional. In addition, an American social worker administered the Peabody Picture Vocabulary Test and the Peabody Individual Achievement Test in English. The testing took place in the child's home and behavioral observations and interviews were also collected. Three clinical case histories are presented to illustrate the findings obtained from this battery. The chapter ends with a description of normative data collected from Hmong school children. The results indicate that the Hmong children performed as well as the American and British normative samples on the WISC-R and the Coloured Matrices. However, older children performed slightly below average on the Standard Matrices. Administration differences between the Coloured and Standard Matrices are suggested as possible reasons for these differences. The results suggest the utility of this approach for refugee groups. (TAC)

2B.027

Jacobson, M. L., & Crowson, T. W. (1983). Screening for depression in Hmong refugees. *Minnesota Medicine*, *66*, 573-574.

Refugee/Ethnic Group: Hmong

Forty-three adult Hmong refugee patients were screened for depression in a primary care clinic using the Zung Self-Rating Depression Scale. Results show 65.1% of patients having scores suggestive of depression. (MEDLINE/AUTHOR)

2B.028
Joe, V. C. (1971). Review of the internal-external control construct as a personality variable. *Psychological Reports*, *28*, 619-640.

Refugee/Ethnic Group: Asian-American

This article reviews current research in the area of internal-external locus of control. It examines the interaction of this trait with other aspects of personality including the results of personality tests, ethnic group and social class differences, antecedents of internal-external attitudes, anxiety, attempts at controlling the environment, achievement, motivation, reaction to social stimuli, learning, and adjustment. Two studies on Asian-Americans are reviewed. One indicated that Caucasian-Americans were significantly more internally controlled than American born Chinese. The second reported that internal locus of control was related to achievement for all minority groups except Asian-Americans. (HAAPIMH/TAC EDITED)

2B.029
Kinzie, J. D., Manson, S. M., Vinh, D. T., Tolan, N. T., Ahn, B., & Pho, T. N. (1982). Development and validation of a Vietnamese-language depression rating scale. *American Journal of Psychiatry*, *139*, 1276-1281.

Refugee/Ethnic Group: Vietnamese

The authors describe the development of the Vietnamese Depression Scale, which contains culturally consistent items describing the thoughts, feelings, and behaviors of depressed individuals and items describing common clinical characteristics of depressed Vietnamese patients. After pretesting, the preliminary 43-item scale was given to 21 depressed Vietnamese patients (mean age 33.5 yrs) and a matched community sample of 44 Ss (mean age 32.8 yrs). 15 items accounted for 96% of the variance between the 2 groups and were used as the final form of the scale. ((c)APA)

2B.030
Lin, E. H., Ihle, L. J., & Tazuma, L. (1985). Depression among Vietnamese refugees in a primary care clinic. *American Journal of Medicine*, *78*, 41-44.

Refugee/Ethnic Group: Vietnamese

Refugees are at high risk for mental disorders and manifest cultural influences in their health behavior. The Vietnamese Depression Scale was administered to Vietnamese patients at a community clinic to assess the underlying prevalence of depression. The rate of accurate diagnosis and the manifestations of depression were also examined. A high prevalence of depression (52 percent) and a high level of underdiagnosis (56 percent) by primary care physicians were found. Ninety-five percent of these patients presented with physical symptoms. Compared with patients who had negative depression scores, those who had positive depression scores were more likely to be older and sought care at the clinic more frequently. These findings underscore the importance of depression as an urgent health problem among Vietnamese refugees in primary care. Accuracy in diagnosis can be improved by using the Vietnamese Depression Scale and constitutes the first step toward effective treatment. (MEDLINE/AUTHOR)

2B.031

Lin, K. M., Masuda, M., & Tazuma, L. (1984). Problems of Eastern refugees and immigrants: Adaptational problems of Vietnamese refugees: IV. *Psychiatric Journal of the University of Ottawa*, *9*, 79-84.

Refugee/Ethnic Group: Vietnamese

Reports the longitudinal trend in life change, adaptation, and health status of 282 Vietnamese refugees over a 3-yr period. Instruments included the Cornell Medical Index (CMI), Social Readjustment Rating Scale, and Schedule of Recent Life Events. Ss continued to make substantial progress, which was reflected in the reduction of unemployment and improvement in transportation and housing condition. However, the degree of life change continued to be about 3 times higher than the pre-refugee scores, and CMI scores remained highly elevated all through the 3 study phases, with about half of the Ss having scores higher than the cut-off points suggestive of emotional difficulties. CMI scores were significantly correlated with total life change score and financial, personal, and family subscores. CMI scores were also significantly correlated to age by sex interactions, marital status, religion, previous refugee experience, mother's death, welfare status, ability to drive, and pessimistic feeling about the future, but not to education and employment. Life events, particularly those in the areas of finance, personal situation, and family, continued to affect the Ss, resulting in persistent dysfunction in their health and adaptation. Factors further aggravating these impacts are also identified. ((c)APA)

2B.032
Lin, K. M., Tazuma, L., & Masuda, M. (1979). Adaptational problems of Vietnamese refugees: I. Health and mental health status. *Archives of General Psychiatry, 36,* 955-961.

Refugee/Ethnic Group: Vietnamese

Administered the Cornell Medical Index to a total of 293 Vietnamese refugees in the US in 1975 and 1976. Results indicate a high and continuing level of physical and mental dysfunction. The follow-up administration showed an increase in anger and hostility with concomitant reductions in feelings of inadequacy. ((c)APA)

2B.033
MacKinnon, R. A., & Michels, R. (1971). *The psychiatric interview in clinical practice.* Philadelphia: W.B. Saunders, Co.

Refugee/Ethnic Group: Hispanic; General

This general book on the psychiatric interview contains a chapter describing how to interview through an interpreter, as well as a section on Spanish-speaking minorities. The chapter on interpreters discusses selecting and instructing interpreters, transference and countertransference issues, and modifications of the interview. (TAC)

2B.034
Marcos, L. R. (1979). Effects of interpreters on the evaluation of psychopathology in non-English-speaking patients. *American Journal of Psychiatry, 136,* 171-174.

Refugee/Ethnic Group: General

The purpose of this paper was to explore the process of interpreter-interview assessment of psychopathology and to identify the major distortions that arise in this common practice. Two procedures were used: 1) open discussions with psychiatrists and lay hospital interpreters, and 2) a content analysis of 8 audiotaped psychiatric evaluations of non-English speaking patients conducted through an interpreter. Three major sources of interpretive distortions were identified: 1) deficient linguistic and/or translation skills of the interpreter, 2) interpreter's lack of psychiatric sophistication, and 3) interpreter's attitudes toward either the patient or clinician. The author presents specific recommendations to minimize errors. (TAC)

2B.035
Marcos, L. R., Alpert, M., Urcuyo, L., & Kesselman, M. (1973). The effect of interview language on the evaluation of psychopathology in Spanish-American schizophrenic patients. *American Journal of Psychiatry, 130*, 549-553.

Refugee/Ethnic Group: Hispanic

Psychiatric ratings of ten schizophrenic patients whose native language was Spanish disclosed more psychopathology when the patients were interviewed in the English language than when they were interviewed in Spanish. Some evidence suggested that there were clinically important changes in the patient attributable to his problems in speaking in a second language. The clinician's frame of reference must also be taken into account: what is applicable to native English-speaking patients cannot be directly applied to the evaluation of persons from other cultures. (TAC)

2B.036
Marcos, L. R., Urcuyo, L., Kesselman, M., & Alpert, M. (1973). The language barrier in evaluating Spanish-American patients. *Archives of General Psychiatry, 29*, 655-659.

Refugee/Ethnic Group: Hispanic

Authors have previously demonstrated that Spanish-speaking schizophrenic patients interviewed in English are judged by experienced raters as significantly more psychopathological than when interviewed in their native tongue. In this study behavior in the two interview situations was compared directly. Compared to the parallel Spanish-language situation, patients interviewed in English demonstrated more content indicative of psychopathology, more frequent misunderstandings of the interviewer, briefer responses, and a significantly higher frequency of disturbances previously shown to be associated with anxiety. Patients tended to speak more slowly and with longer silent periods, characteristics associated with depression. Unless aware of these features, the clinician may interpret them as reflecting increased psychopathology. (TAC)

2B.037
Masuda, M., Lin, K. M., & Tazuma, L. (1980). Adaptation problems of Vietnamese refugees: II. Life changes and perception of life events. *Archives of General Psychiatry, 37*, 447-450.

Refugee/Ethnic Group: Vietnamese

Documents Vietnamese perceptions of life events as well as the occurrences of these life events. Questionnaires (Cornell Medical Index, Social Readjustment Rating Scale) were administered to 239 Vietnamese refugees in the US in 1975 and 1976 as part of an ongoing study. The expected high amount of life change in the year of the evacuation and resettlement (1975) continued into the following year (1976). Financial, life-style, work, spouse, and schooling problems continued to plague them and were increased in the 2nd yr. There was a positive correlation between life change and health status. The Vietnamese rank ordered the impact of life events in a fashion similar to Americans, but there were differences in mean magnitude estimations. Substantial reductions in magnitude estimations at 2nd administration of the social readjustment rating scale indicated a change in the situational perception set with time. ((c)APA)

2B.038

Miller, V., Onotera, R. T., & Deinard, A. S. (1984). Denver Developmental Screening Test: Cultural variations in Southeast Asian children. *Journal of Pediatrics, 104*, 481-482.

Refugee/Ethnic Group: Southeast-Asian

The Denver Developmental Screening Test is commonly used to screen young children for delays in the areas of personal-social, fine motor-adaptive, language, and gross motor development. It is predicated on the concept that a child should have developed certain skills by a given age. Children of cultural backgrounds different from the population in which the test was standardized (predominantly white and middle class: 82% white, 11% Spanish, and 7% black) may fail certain items because of cultural differences. Failure to recognize social or cultural variations in special groups of children may lead to scoring falsely certain items as developmental delays and thus to unnecessary referrals (and expense) for diagnostic assessment. Recently, many Southeast Asian refugee children (Hmong, Laotian, Vietnamese, and Cambodian) have been screened before obvious acculturation has taken place. The purpose of our study was to determine which DDST items may be failed because of cultural differences. (MEDLINE/AUTHOR)

2B.039

Naditch, M. P., & Morrissey, R. F. (1976). Role stress, personality, and psychopathology in a group of immigrant adolescents. *Journal of Abnormal Psychology, 85*, 113-118.

Refugee/Ethnic Group: Cuban

Applied a role stress-personality framework to the analysis of psychopathological symptoms in a nonclincal sample of 155 Cuban refugees in Miami, Florida. Measures included the Eysenck Personality Inventory, Cantril's Self-Anchoring Striving Scale, and Zuckerman and Lubin's Depression and Anxiety Adjective Checklist. Ambiguity regarding evaluations of performance in the dating role was more consistently related to symptoms of psychopathology than were either role conflict or ambiguity regarding role expectations. Extraversion-introversion and relative discontent were also associated with psychopathological symptoms, with some sex differences. Results suggest that high rates of mental illness among immigrant groups may be partially a function of evaluation ambiguity and the resultant problems of identity formation amid conflicting cultural patterns. ((c)APA)

2B.040
Nicassio, P. M. (1983). Psychosocial correlates of alienation: Study of a sample of Indochinese refugees. *Journal of Cross-Cultural Psychology, 14*, 337-351.

Refugee/Ethnic Group: Lao; Vietnamese; Hmong; Cambodian

Studied the relationship between several measures of psychosocial adjustment and social alienation in a sample of Indochinese refugees residing in the US. Based on interviews with 460 Indochinese heads of households, the results indicate that alienation was negatively related to SES, English proficiency, the number of American acquaintances and friends, and refugees' self-perception. Moreover, alienation was positively correlated with the degree of perceived difference between refugees and Americans. Laotian and Vietnamese refugees showed evidence of a more favorable adjustment than Hmong and Cambodian refugees on several measures. ((c)APA)

2B.041
Penner, L. A. & Anh, T. (1977). A comparison of American and Vietnamese value systems. *The Journal of Social Psychology, 101*, 187-204.

Refugee/Ethnic Group: Vietnamese

The purpose of this study was to investigate the similarities and differences in value systems between Americans and Vietnamese. A national sample of 1427 Americans was given Rokeach's value survey. The scale was then translated into Vietnamese and given to a randomly selected group of 349 Vietnamese living in South Vietnam shortly before the fall of the Saigon government. Three comparisons of value systems were conducted via stepwise discriminant analyses: a) overall differences between Americans and Vietnamese, b) differences between males and females in the two countries, and c) differences between individuals with comparable amounts of education in the two countries. In terms of overall differences, Vietnamese were more concerned about their security and less concerned about their individual freedom than were Americans. This difference was even more pronounced when Vietnamese women were compared with American women. Finally, it was found that the college-educated Vietnamese respondents were more like their American counterparts than were less educated

Vietnamese. Further, in many respects, the values of college-educated Vietnamese were more similar to Americans' values than to other Vietnamese. The implications of these findings in terms of cross-cultural value differences and the impact of the American presence in Vietnam were discussed. (NIUCSEAS/AUTHOR)

2B.042
Pierce, R. C., Clark, M. M., & Kiefer, C. W. (1972). A "bootstrap" scaling technique. *Human Organization, 31*, 403-410.

Refugee/Ethnic Group: general

Acculturation can be analyzed into cognitive, behavioral, and attitudinal components. The authors attempted to develop a cognitive measure of acculturation by presenting pictures to 23 JA and 27 MA. These pictures depicted aspects of American, Japanese, and Mexican cultures. It was assumed that the greater the acculturation, the greater the ability to correctly identify American pictures and the smaller the likelihood of correctly identifying "ethnic" pictures. Findings indicated that successive generations of Japanese- and Mexican-Americans are better able to identify American pictures and less able to identify ethnic pictures. Through statistical techniques and item selection, it was possible to devise a test for cognitive acculturation. (HAAPIMH)

2B.043
Polley, R. B. (1984). Subjectivity in issue polarization. *Journal of Applied Social Psychology, 14*, 426-440.

Refugee/Ethnic Group: Vietnamese; General

Applied SYMLOG (System for the Multiple Level Observation of Groups), a method and theory of group observation and analysis developed by R. F. Bales and S. P. Cohen (1979) to the examination of issue polarization. 26 female and 24 male undergraduates (median age 23 yrs) completed a questionnaire designed to measure attitudes on questions concerning abortion, nuclear disarmament, protection of endangered species, alternative energy funding, Helsinki accords, immigration law, neutron bomb development, privacy protection, compensation for victims of crime, and assimilation of Vietnam refugees. Using a "phantom other" technique, the locations in SYMLOG's 3-space of values for polar stands on these controversial issues were measured. There was a high rate of agreement on these locations, despite great diversity of opinion on the issues themselves. Subjectivity in locations is explained by K. Lewin's (1951) theory of vectors of attraction and repulsion. Ss tended to draw toward their global favored (pro) locations those stands with which they agreed. For example, an S who opposed abortion on demand would draw toward his or her pro location the image of "opposes abortion on demand." Subjectivity in issue polarization seemed to be organized around attraction to and repulsion from the pro location without regard to the individual's global opposed (con) location. ((c)APA)

2B.044
Price, J. (1975). Foreign language interpreting in psychiatric practice. *Australian and New Zealand Journal of Psychiatry, 9*, 263-267.

Refugee/Ethnic Group: General

This article examines the problems of foreign language interpreting in psychiatric practice. It is demonstrated how an interpreter's apparent competence may readily be mistaken for true competence and that it is well worthwhile formally assessing an interpreter's command of his second language. In interpreting from patient to psychiatrist, the omission of important material was found to be a noteworthy feature. Here the meaninglessness of material not only favoured its omission but also often indicated important psychopathology. It was found that the more psychotic the patient the more likely it was that mistakes in interpreting from patient to doctor would occur. (TAC/AUTHOR)

2B.045
Sabin, J. E. (1975). Translating despair. *American Journal of Psychiatry, 132*, 197-199.

Refugee/Ethnic Group: Hispanic

The author reviews two cases of suicide by Spanish-speaking patients who were evaluated and treated by English-speaking psychiatrists using a translator. He suggests that the patient's emotional suffering may be selectively underestimated when the clinician works by means of translation. The diagnosis may emphasize psychotic features of the illness and minimize the affective component; consequently the risk of suicide may be underestimated. (TAC)

2B.046
Scofield, R. W., & Sun, C. W. (1960). A comparative study of the differential effect upon personality of Chinese and American child-training practices. *Journal of Social Psychology, 52*, 221-224.

Refugee/Ethnic Group: Chinese; White

Whether differences in permissiveness of childrearing practices between Chinese and white middle-class parents can cause significant differences in personality development is explored using the Whiting and Child methodology. Subjects were

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40 Chinese students at Oklahoma State University, of whom 36 came from mainland China, 3 from Malaysia, and 1 from Taiwan. Each subject was asked to describe childhood training practices in his/her family following the Whiting and Child methodology. Primary foci were dependency, aggression, and oral, anal, and sex concerns. Cattell's 16 PF Personality Test was given to the 40 Chinese students. The results were then compared to norms published for American college students (N=604). Relative to Americans, Chinese were characterized as more withdrawn, shy, introverted, sensitive, cold, aloof, schizophrenic, and emotionally insecure. Because the sample was small and unique, the authors caution against overgeneralizations about the Chinese population at large. It was nonetheless concluded that the severity of Chinese childrearing practices experienced by the sample produced a significant difference in personality organization from that of the American students. Similar C-WA levels of compulsivity, rigidity of control, and sociability reflect an absence of group differences in the severity of anal training alone. (HAAPIMH)

2B.047

Sloggett, B., Gallimore, R., & Kubany, E. S. (1970). A comparative analysis of fantasy need achievement among high and low achieving male Hawaiian-Americans. *Journal of Cross-Cultural Psychology, 1*, 53-61.

Refugee/Ethnic Group: Japanese; Filipino

Forty-eight Hawaiians from a competitive private Hawaiian school representing the high achievement (HA) group were compared to 31 Hawaiians at a low-income Los Angeles high school representing the low achievement (LA) group. Also included were 13 Japanese and 15 Filipinos for comparison purposes from the same grades and schools. Merbaum developed a set of 12 TAT-like pictures with deliberately ambiguous racial cues. The pictures were administered in a group setting in each school. The HA Hawaiians had significantly higher reading and math scores than the other three groups on writing ability. The overall n Ach showed significant differences only between HA Hawaiians and Japanese. The n Ach for Hawaiian males suggests they do not behave as middle-class, white children, but fails to explain what motivates those Hawaiians who do achieve. Achievement motivation cannot be assessed outside the context of values peculiar to the subcultural group. (HAAPIMH)

2B.048

Smither, R., & Rodriguez-Giegling, M. (1979). Marginality, modernity, and anxiety in Indochinese refugees. *Journal of Cross-cultural Psychology, 10*, 469-478.

Refugee/Ethnic Group: Vietnamese; Lao; Southeast-Asian

Indochinese refugees to the US face major psychological adjustments to a modern, industrialized society. This exploratory study measured marginality, modernity, and anxiety (using, respectively, the Marginality Abstract; the modernity scale from the Personal Values Abstract; and the State-Trait Anxiety Inventory) in a group of 45 Vietnamese and Laotian refugees (mean age 20 yrs). As predicted, the refugees scored higher in marginality and anxiety and lower in modernity than a random sample of 44 Americans. A negative relationship was found for marginality and anxiety for the Laotians, and no significant relationship between these 2 variables was found for the Vietnamese. A positive relationship between anxiety and marginality was found for the American sample. Findings question the relevance of the concept of marginality when studying the psychological states of refugees. ((c)APA)

2B.049

Sue, **D. W., & Frank, A. C.** (1973). A typological approach to the psychological study of Chinese- and Japanese-American college males. *Journal of Social Issues, 29*, 129-148.

Refugee/Ethnic Group: Asian-American; Chinese-American; Japanese-American

The School and College Ability Tests, Strong Vocational Interest Blank, and Omnibus Personality Inventory were utilized to determine the psychological typologies of 104 Chinese-American and 50 Japanese-American male college students attending the University of California-Berkeley. Most of the Asian American subjects were classified into two of seven homogeneous subgroups, each corresponding to a specific psychological profile. The dominant characteristics exhibited by Asian-American males were avoidance of abstract theoretical approaches, low tolerance for ambiguity, liking for structure, and a tendency to evaluate ideas on the basis of immediate practical applicability. Vocational choices were consistent with the cultural emphasis on quantitative activity. More AA chose to enter the physical science, technical trade and business-retail occupations than the verbal-linguistic, social science, and sales fields. The authors also found distinct differences between the CA and JA samples. JA were more autonomous and free from traditional authority, expressing greater interest in blue collar, outdoor, and physically active vocations than CA. Historical and cultural background factors are thought to account for the differences in vocational preference. The data suggest that Asian-Americans experience more stress than WA. AA in the sample felt more isolated, lonely, rejected, anxious, worried, and nervous than their WA peers. The authors note that generalization of their findings may be limited due to the selective sample used. (HAAPIMH)

2B.050

Sue, **D. W., & Kirk, B. A.** (1972). Psychological characteristics of Chinese-American students. *Journal of Counseling Psychology, 19*, 471-478.

Refugee/Ethnic Group: Asian; Chinese-American

In 1966, all entering freshmen at the University of California at Berkeley were asked to complete the School and College Ability Test, the Strong Vocational Interest Blank, and the Omnibus Personality Inventory. Some 236 CA students were identified for comparison with students of all other ethnicities. This article compares the results, noting male/female differences. (HAAPIMH/TAC EDITED)

2B.051

Sue, S., & Sue, D. W. (1974). MMPI comparisons between Asian-American and non-Asian students utilizing a student health psychiatric clinic. *Journal of Counseling Psychology, 21*, 423-427.

Refugee/Ethnic Group: Asian

The Minnesota Multiphasic Personality Inventory (MMPI) records of 46 Chinese and Japanese students (18 M, 28 F) were compared to a control group of 120 non-Asians (60 M, 60 F) who used a West Coast university student psychiatric clinic. The results indicate that AA used the clinic less than the control group. Additionally, both AA M and F showed higher scores in the severity of their psychotic profiles than the control group. The study indicates that the underutilization of a psychiatric clinic by AA may be due to cultural factors rather than a paucity of mental problems. (HAAPIMH/TAC EDITED)

2B.052

Sutcliffe, C. R. (1974). Achievement motivation and economic development among peasants: An exploration of measurement problems. *Rural Sociology, 39*, 238-246.

Refugee/Ethnic Group: Palestinian

Interviewed Palestinian refugees and nonrefugees to test the hypothesis that achievement motivation is partially responsible for economic growth. Results suggest there was little correlation between achievement motivation and economic growth. ((c)APA)

2B.053

Tanaka-Matsumi, J., & Marsella, A. J. (1976). Cross-cultural variations in the phenomenological experience of depression. *Journal of Cross-Cultural Psychology, 7*, 379-396.

Refugee/Ethnic Group: Japanese; Japanese-American; White

Cross-cultural variations in the subjective experience of depression among normal college populations of Japanese-Nationals, Japanese Americans, and Caucasian-Americans were investigated by examining word associations to the equivalent word of depression and yuutsu. The results indicated that Japanese-Nationals associated more external referent terms, such as "rain" and "cloud," and somatic referent terms, such as "headache" and "fatigue," to the word yuutsu. In contrast, both Japanese-Americans and Caucasian-Americans associated predominantly internal mood state terms, such as "sad" and "lonely," to the word depression. These differences are attributed to variations in the self-structure which mediates the subjective experience of depression in the different cultures. Japanese self-structure was considered to be essentially "unindividuated," while American self-structure was considered to be essentially "individuated." (HAAPIMH)

2B.054

Thaver, F., Arkoff, A., & Elkind, L. (1964). Conceptions of mental health in several Asian and American groups. *Journal of Social Psychology, 62*, 21-27.

Refugee/Ethnic Group: Asian; Japanese; Thai; Filipino

The study was designed to ascertain the degree to which groups of students from four Asian countries shared the views of mental health held by a comparable American student group and by a group of American psychologists. For five of the groups, participants were drawn from the East-West Center of the University of Hawaii: 19 Chinese (12 M, 7 F), 21 Japanese (13 M, 8 F), 15 Thais (7 M, 8 F), 19 Filipinos (10 M, 9 F), and 24 Americans (8 M, 16 F). The sixth group was composed of 20 Ph.D. counseling and clinical psychologists (WA males). In order to determine conceptions of mental health, the final 60-item form of the Nunnally (1961) questionnaire was used. For each questionnaire item the subject was asked to indicate extent of agreement or disagreement on a seven-point scale. The items were: 1. Look and act different, 2. Willpower, 3. Sex distinction, 4. Avoidance, 5. Guidance and support, 6. Hopelessness, 7. External causes vs. personality, 8. Nonseriousness, 9. Age function, 10. Organic causes, 11. Miscellaneous. Data show that the two areas of sharpest discrepancy between the Asians and Americans involved items regarding "morbid thoughts" and "willpower." The Asians generally agreed mental health was to be enhanced by exercising willpower, avoiding unpleasant thoughts, and occupying oneself with pleasant thoughts; both American groups in the main rejected such ideas. There was no statistically significant difference in scores between the four Asian groups and the two American groups. (HAAPIMH)

2B.055

Tseng, M. S. (1972). Attitudes toward the disabled: A cross-cultural study. *Journal of Social Psychology, 87*, 311-312.

Refugee/Ethnic Group: Asian

It is hypothesized that positiveness of attitudes toward the handicapped varies with cultural modernity and racial minority group status. In this study, perspectives on the disabled are probed with cultural orientation, locus of control, ethnicity, and manifest anxiety as independent variables. Subjects were 67 Asian students (54 M, 13 F) and 61 American students (47 M, 14 F) at West Virginia University. Instruments used were the Rotter I-E Scale, the Attitudes Toward Disabled Persons Scale-Form A, and the Taylor Manifest Anxiety Scale. For Asian subjects, manifest anxiety and length of residence in the U.S. were primary correlates of attitudes toward the handicapped. Attitudes became progressively more negative as individual anxiety level increased. The longer the Asian subjects had resided in the U.S., the more sympathetic their attitudes became ($p<.05$). American subjects showed more positive attitudes than Asians significant at the .001 level. The American low anxiety-internal group showed significantly more positive feelings toward the disabled than did the Asian high anxiety-external groups ($p<.05$). Asian students living in the United States over a year tended toward a more external orientation than American students but were more internal than Asian students here less than a year. (HAAPIMH)

2B.056

Tuddenham, R. D., Brooks, J., & Milkovich, L. (1974). Mothers' reports of behavior of ten-year-olds: Relationships with sex, ethnicity, and mother's education. *Developmental Psychology, 10*, 959-995.

Refugee/Ethnic Group: White; Black; Asian-American; Hispanic

Some 3,000 of 19,044 children born between 1960-1967 predominantly at the Kaiser Foundation Hospital in Oakland, CA., were comprehensively evaluated at ages 5 and 10 for normal or abnormal development. Ethnic division for the nonclinical sample aged 9-11 was 65% white, 23% black, 4% Oriental, 3% Chicano, and the remainder mixed or unclassified. The minority sample was higher in SES than the typical urban minority population. Data were drawn from a 20-minute interview with a parent. Changes in health and social circumstances were discussed. The Children's Behavior Deck, 100 IBM cards depicting a problem behavior or temperamental characterstic, was presented to the informant. The children completed Progressive Matrices or the Peabody Picture Vocabulary Test. Findings: Mothers used different terms distinguishing their sons from their daughters, regardless of ethnic membership. However, divergent value systems emerged for each racial group. Terms used by Oriental mothers in describing their sons' behavior included "talks too loud, shows off, doesn't mind being seen undressed, likes attention, fights to get his own way, likes athletics." Girl items include "doesn't mind losing a game, often seems tired, speaks too softly, is dependable." Oriental mothers differ least from whites and most from blacks in patterns of characterizing their children. Oriental and white mothers made more positive statements about their children than did black mothers. While Oriental mothers frequently saw their children as shy, self-effacing, and overcontrolled, closer inspection of the data reveals distinctive subcultural influences. On balance, the four groups of mothers resembled each other more than they differed from one another, especially regarding the mood, temperament, and energy level of their children. (HAAPIMH)

2B.057

Valdes, T. M., & Baxter, J. C. (1976). The social readjustment rating questionnaire: A study of Cuban exiles. *Journal of Psychosomatic Research*, *20*, 231-236.

Refugee/Ethnic Group: Cuban

A revised form of the Holmes and Rahe Scale was administered to a group of Cuban exiles who presented special cultural characteristics and life experiences. Cross-cultural comparisons with the American sample were made, and areas of stress in cultural readjustment to the U.S. were discussed based on the rating results. Mainly, separation from the homeland and family, and cultural differences in family patterns were judged to be the most difficult life changes in terms of readjustment. (MEDLINE/AUTHOR)

2B.058

Vinacke, C. K. (1959). A comparison of the Rosenzweig P.F. study and the Brown interracial version: Hawaii. *Journal of Social Psychology*, *49*, 161-176.

Refugee/Ethnic Group: Asian-American

The Rosenzweig Picture-Frustration Test and Brown's modification were administered to 50 subjects in Hawaii. Half of the subjects were given Rosenzweig's test first, and half received Brown's modification. All retests were given 1 week later. Scoring reliability, test-retest reliability, relationships between classes of items, and comparisons of the performance of four Asian-American groups were made. No important differences between the four groups were found. (HAAPIMH)

2B.059

Westermeyer, J., Neider, J., & Vang, T. F. (1984). Acculturation and mental health: A study of Hmong refugees at 1.5 and 3.5 years postmigration. *Social Science & Medicine*, *18*, 87-93.

Refugee/Ethnic Group: Hmong

Examined changes on self-reported symptoms among 83 Hmong refugees (aged 16+ yrs) in Minnesota over a 2-yr period. Premigration and postmigration factors were studied along with responses to the SCL-90 and a self-rating scale for depression. Findings show considerable improvement on psychiatric self-rating scales in the areas of depression, psychoticism, and phobic anxiety. Social changes over the 2-yr interim (including a high unemployment rate) were few. Earlier premigration and postmigration variables that were correlated with high symptom levels at 1.5 yrs such as older age, gender, and number of hospital visits in the US were not correlated with these symptoms at 3.5 yrs. Events in the acculturation process which accompany and perhaps account for some of these observations are indicated. ((c)APA)

2B.060

Westermeyer, J., & Sines, L. (1979). Reliability of a cross-cultural psychiatric diagnosis with an assessment of two rating contexts. *Journal of Psychiatric Research, 15*, 199-213.

Refugee/Ethnic Group: Lao

Studies on inter-rater reliability of psychiatric diagnosis have so far focused primarily on contexts in which clinician and patient belong to the same cultural group. In this study, four clinicians assigned diagnoses to a group of Asian peasants from Laos. Two different rating contexts were employed: independent ratings using case reports, and concurrent ratings using all available data. Confidence of clinicians in their diagnoses were also assessed. The sample consisted of 35 subjects labeled by Lao peasants as baa ("crazy" or "insane"). Inter-rater reliability scores were comparable to those obtained by previous studies in which clinicians and patients were from the same, or similar cultures. Concurrent diagnoses showed greater agreement among raters than did inter-rater diagnoses separated by a 6 month interval. Diagnostic reliability was correlated with clinician confidence in diagnosis. (AUTHOR)

2B.061

Westermeyer, J., Vang, T. F., & Neider, J. (1983). A comparison of refugees using and not using a psychiatric service: An analysis of DSM-III criteria and self-rating scales in cross-cultural context. *Journal of Operational Psychiatry, 14*, 36-41.

Refugee/Ethnic Group: Hmong

Identified and collected data from all Hmong refugees in Minnesota and informed them of available psychiatric services. Ninety-seven 16+ yr olds were administered the Self-Rating Depression Scale and the Symptom Checklist-90. Ss were also classified according to DSM-III criteria; 17 patients were identified. As anticipated, the most common clinical symptom involved depression, though the severity was greater than expected. The self-rating scales demonstrated that severe symptoms of some duration were present among the patients prior to their seeking care. Findings also indicate that the psychosocial stressors experienced by psychiatric patients, while considerable, were not appreciably different from those experienced by the entire group. It is suggested that the 1-yr incidence of psychiatric disorder was related to the severity of psychosocial stressors experienced by the patient group and the high level of symptoms experienced by the entire group. Also noted is the "reverberation phenomenon" in which patients commonly showed major signs of one syndrome and minor signs of one or several other syndromes. ((c)APA)

2B.062
Westermeyer, J., Vang, T. F., & Neider, J. (1983). Migration and mental health among Hmong refugees: Association of pre- and postmigration with self-rating scales. *Journal of Nervous & Mental Disease, 171*, 92-96.

Refugee/Ethnic Group: Hmong

To date, there have been no epidemiological studies of a refugee population using self-rating scales. This method was used in the present study of 97 Hmong refugees (average age 31 yrs) in Minnesota. Self-reported symptoms (on the Self-Rating Scale for Depression and the Symptom Check List-90) were compared with pre- and postmigration factors to assess those characteristics associated with increased symptom reporting. Relatively few premigration factors influenced these self-reports, whereas several postmigration factors were significantly correlated with symptoms (e.g., access to someone knowledgeable about both American and Hmong cultures; use of native healers). Findings suggest certain interventions that might enhance the adjustment of subsequent refugees. ((c)APA)

2B.063
Westermeyer, J., Vang, T. F., & Neider, J. (1984). Symptom change over time among Hmong refugees: Psychiatric patients versus nonpatients. *Psychopathology, 17*, 168-177.

Refugee/Ethnic Group: Hmong

Investigated psychopathology and its course over time in 97 Laotian Hmong refugees in Minnesota. Seventeen psychiatric patients and 80 nonpatients were administered the Self-Rating Depression Scale and the SCL-90 and reassessed 2 yrs later. Ss were offered psychiatric services between assessments. Those who sought psychiatric care were compared with those who did not. The data indicated that, prior to receiving care, patients reported significantly more psychopathology than nonpatients on the Self-Rating Depression Scale and on 9 of 10 scales on the SCL-90. On the remaining scale of the SCL-90, patients showed more symptoms, but the difference was not statistically significant. The patients showed more improvement than the nonpatients between assessments. Overall, results indicate that Ss experienced the highest recorded 1-yr incidence rate (18%) of psychiatric disorder yet observed in any group of adults. ((c)APA)

2B.064
Westermeyer, J., & Wintrob, R. (1979). "Folk" criteria for the diagnosis of mental illness in rural Laos: On being insane in sane places. *American Journal of Psychiatry, 136*, 755-761.

Refugee/Ethnic Group: Lao

"Folk" criteria for identifying the mentally ill, as distinguished from folk theories about the causes of mental illness, have been comparatively neglected in cultural psychiatry. The authors describe the criteria by which villagers in Laos labeled 35 subjects as baa (insane). Unprovoked assaultive or destructive behavior, social isolation, self-endangerment due to neglect of personal needs, nonviolent but socially disruptive or inappropriate behavior, and inability to do productive work were found to be important folk criteria. The authors emphasize that folk criteria for mental illness are determined primarily by the persistence of socially dysfunctional behavior rather than by disturbances in thought and affect. (AUTHOR)

2B.065
Westermeyer, J., & Zimmerman, R. (1981). Lao folk diagnoses for mental disorder: Comparison with psychiatric diagnosis and assessment with psychiatric rating scales. *Medical Anthropology, 5*, 425-443.

Refugee/Ethnic Group: Lao

The purpose of this study was to evaluate two folk categories of psychiatric illness found among Lao villagers. The two conditions were: "baa" (insane or crazy) and "sia chit" (nervous problem or nervous breakdown). Thirty-five individuals were interviewed by four clinicians after having been identified by community leaders as being "baa;" three persons were interviewed who had received a folk diagnosis of "sia chit". Following the interviews, psychiatric diagnoses were made and compared to the original folk diagnoses. The results indicate few diagnostic differences, suggesting that broad culture-bound concepts of mental illness among the Lao resemble general cross-cultural concepts of psychiatric disorders. (TAC)

2B.066
Williams, C. L. (1986). Mental health assessment of refugees. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

This chapter provides an overview of the literature on minority mental health and cross-cultural psychology/psychiatry in order to provide recommendations for the mental health assessment of refugee patients. Caution is recommended in interpreting findings from assessment data, and it appears best to rely on multiple sources of information, rather than any single source. Sensitivity to existing minority groups' criticisms of psychological assessment is also recommended. Various assessment procedures available to clinicians with refugee patients are described: interviews, mental status exam, information from significant others, behavioral observations, psychological tests, and working with translators. (AUTHOR)

2B.067
Yamamoto, J., Lam, J., Choi, W. I., Reece, S., Lo, S., Hahn, D. S., & Fairbanks, L. (1982). The Psychiatric Status Schedule for Asian Americans. *American Journal of Psychiatry, 139(a)*, 1181-1184.

Refugee/Ethnic Group: Asian-American

Authors have translated the Psychiatric Status Schedule (PSS) into Chinese, Filipino, Japanese, Korean, Samoan, and Vietnamese and have developed an audiovisual version of the schedule. Their objective in developing the scale was to develop a more reliable method of diagnoses than that of using translators for Asian-language-speaking patients. The objectives of the present study were to determine the reliability of the audiovisual version of the PSS and to determine if relatively untrained volunteers (Asian-language-speaking) could use the materials and obtain reliable ratings. Authors report results with Chinese and Korean patients and Japanese nonpatients. The reliabilities were good for the patient population and the authors conclude that when Asian-language-speaking mental health professionals are unavailable the audiovisual PSS provides an improved method of diagnosis. (NIMH)

2B.068
Yee, L. Y., & LaForge, R. (1974). Relationship between mental abilities, social class, and exposure to English in Chinese fourth graders. *Journal of Educational Psychology, 66*, 826-834.

Refugee/Ethnic Group: Asian-American

The study examined the relationship between the raw scores on the Wechsler Intellegence Scale for Children (WISC), social class, and exposure to English in 53 (24M, 29F) 9-to-10-year old Chinese-Americans in a private school in San Francisco. Social class was defined on the basis of the residence, education, and occupation of the father or head of the household. The variable, exposure to English, was the result of a factor analysis of 30 variables assessed via a parent interview. Parents were interviewed in English or in Chinese, depending on the parents' language facility. The WISC was administered by the senior author to subjects who could "carry on a normal conversation in English," whose "understanding of the English language (was) adequate for (their) age," and who were American born. No statistically significant relationship was found between social class and the 12 WISC subtests, the WISC overall total, the six WISC verbal subtests, the WISC verbal total, or the WISC performance total. Statistically significant relationships were found between social class and the six WISC Performance subtests and exposure to English and the WISC Overall total. (HAAPIMH)

2B.069
Young, N. F. (1972). Independence training from a cross-cultural perspective. *American Anthropologist*, *74*, 629-638.

Refugee/Ethnic Group: Asian-American; Chinese

This article considers the role of achievement or independence training in Chinese immigrant and Chinese-American children living in Hawaii. Twenty immigrant Chinese families and 32 Hawaii-born Chinese families with sons 9-12 participated. The immigrant fathers were typically cooks and butchers, while CA fathers were predominantly professionals. The mothers were asked to complete a childrearing questionnaire developed by Winterbottom. Achievement motivation of the boys was determined by their n-Ach scores derived from the TAT. Actual achievement was determined by their school grades, teacher ratings, preference for delayed gratification, and inclination toward intermediate risk-taking. The results indicated that measures of achievement, achievement-motivation, and achievement-oriented behaviors did not differ significantly between the CA and immigrant boys. An examination of the independence training questionnaire revealed that despite socioeconomic differences between the two groups, immigrant and CA mothers reported similar sanctioned and nonsanctioned behaviors for their sons. Compared to previous data on Caucasian boys, Chinese mothers expected their boys to achieve in social situations (e.g., interactions with their peers) at a later age than did Caucasian mothers. However, in areas of academic achievement and caretaking, Chinese mothers expected their sons to achieve at the same age or earlier than Caucasian mothers did. The early age expectancy of achievement in some areas and late expectancy in others invalidate the utility of the independence training questionnaire as an instrument predicting achievement behavior in Chinese boys. The validity of identifying an optimal age for independence training is questionable. Cultural values appear to be vital in determining maternal expectations of achievement behavior. (HAAPIMH)

2B.070
Yu, E. S. H. (1985). Studying Vietnamese refugees: Methodological lessons in transcultural research. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 517-541). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Vietnamese

Methodological problems encountered during a research project with Vietnamese refugees in California are discussed. The application of traditional research methods, such as the survey interview, to minority groups unfamiliar with research concepts is explored. Conceptual differences in life experiences between United States citizens and the Vietnamese refugees are contrasted. Lack of exposure to surveys and interviews leads to suspicion and fear by the refugees that information given may have harmful consequences for them; or be used against relatives still in Vietnam. The differences in conceptual equivalents and linguistics between Vietnamese and English point to a need for a combined 'emic-etic' approach. Specific cultural problems in social interaction with refugees in survey research include: establishment of rapport with community leaders, recruitment and training of interviewers, and obtaining the requisite written consent. The three major problems which arose in obtaining a sample population are addressed: differentiating the various waves of refugees, obtaining lists of correct names and addresses, and locating the sample. (TAC)

2B. Assessment and Diagnosis ...

The following references (identified by their bibliography number) also contain some information relevant to category **2B**:

1A.017, 1A.025, 1A.026, 1A.054

1B.017, 1B.027, 1B.044

1D.042, 1D.047

1E.008, 1E.021, 1E.038, 1E.045, 1E.048

2A.007, 2A.012, 2A.013, 2A.017, 2A.019, 2A.021, 2A.032, 2A.044, 2A.051, 2A.056, 2A.064, 2A.073, 2A.074, 2A.076, 2A.077, 2A.078, 2A.079

2D.003, 2D.007, 2D.013, 2D.015, 2D.016, 2D.018, 2D.019, 2D.024, 2D.025, 2D.026, 2D.027, 2D.028, 2D.029

2E.014

2F.018, 2F.019, 2F.022, 2F.026

3A.004, 3A.006, 3A.013, 3A.016, 3A.017, 3A.023, 3A.027, 3A.029, 3A.037, 3A.044, 3A.049

3E.002, 3E.008, 3E.011

The reader is advised to refer to the above references for more information regarding **Assessment and Diagnosis.**

2C. Needs Assessment ...

2C.001
Aylesworth, L. S., & Ossorio, P. G. (1983). Refugees: Cultural displacement and its effects. *Advances in Descriptive Psychology, 3*, 45-93.

Refugee/Ethnic Group: Vietnamese; Hmong; Cambodian

Issues in the provision of mental health and other social adjustment services to Indochinese refugees in Colorado have raised issues regarding the understanding of cultural displacement phenomena and the ability of service providers systematically to provide effective, culturally appropriate services to culturally displaced client populations. The present authors present a conceptual formulation in connection with an outline for a comprehensive research program. A conceptually derived 202-item nontraditional needs assessment is presented that addresses basic human need (BHN) frustration, negative psychological effects, and psychophysiological effects. This assessment was applied to 119 Vietnamese, 59 Laotian-Hmong, and 39 Cambodian refugees in the Denver-Boulder area. Ss were primarily aged 18-59 yrs. Results reveal significant differences among the 3 groups in their histories, cultures, transitional experiences, BHN frustration levels, and negative psychological effects. Findings are integrated with knowledge gained from a nontraditional mental health services program designed on the conceptually derived social participation model. ((c)APA)

2C.002
Miller, B., Chambers, E. B., & Coleman, C. M. (1981). Indo-Chinese refugees: A national mental health need assessment. *Migration Today, 9*, 26-31.

Refugee/Ethnic Group: Southeast-Asian

This article presents the results of data collected by the Pennsylvania Office of Mental Health on the mental health problems of Southeast Asian refugees. Questionnaires were completed by 1,100 organizations (Community Mental Health Centers, Refugee Mutual Assistance Associations, Voluntary Agencies, etc.) familiar with the problems of refugees. Site visits were made to eight Indochinese Refugee Assistance Programs to obtain a more extensive and personal view of refugee adjustment problems. The results indicate that Southeast Asian refugees as a whole are unwilling to admit to the existence of mental health problems, and so do not seek out the services of the community mental health centers on a large scale. Within the group of refugees seeking mental health services, the primary problems are: depression, anxiety, marital conflict, intergenerational conflict, and school adjustment problems. These problems vary in frequency according to age. (POPLINE/TAC)

2C.003

Robinson, C. (1980). *Special report: Physical and emotional health care needs of Indochinese refugees.* Washington, DC: Indochina Refugee Action Center.

Refugee/Ethnic Group: Southeast-Asian

Review of health and mental health needs of Indochinese refugees based largely on surveys conducted by the Pennsylvania Office of Mental Health and the U.S. Public Health Service. Author stresses that there is "still a pressing need...both to further define and coordinate the roles of the public and private agencies involved, and to enlarge the scope of health and mental health care throughout the whole resettlement process." A major recommendation involves the need for strengthening ethnic community support systems. (NIUCSEAS)

2C.004

Wolf, S. T. (1981). Orientation needs of Indochinese refugees: A survey. *Journal of Refugee Resettlement, 1*, 52-57.

Refugee/Ethnic Group: Southeast-Asian; Vietnamese; Chinese; Cambodian; Lao

This paper discusses a survey (mailed questionnaire) of 1,066 Southeast Asian refugees in Maryland regarding their perception of their information needs on arrival in the U. S. A 23% response rate was obtained, yielding a total of 242 returned questionnaires. The results are summarized according to ethnic group (Vietnamese, Chinese, Cambodian, Lao), and indicate that the refugees wanted to know how to function on a daily basis (how to find a job, a doctor, a place to live, etc.). (TAC)

The following references (identified by their bibliography number) also contain some information relevant to category 2C:

1C.036, 1C.040

1E.023

2A.002, 2A.045, 2A.064

2B.070

2E.001

2F.003

3B.004

The reader is advised to refer to the above references for more information regarding Needs Assessment.

2D.001
Alexander, L. (1968). Military psychiatry, occupation, and refugee problems in Israel. *Military Medicine, 133*, 265-274.

Refugee/Ethnic Group: Israeli

The Six-Day-War fought in 1967 between Israel and the Arab countries produced very few psychiatric casualties. High standards in the selection process and extremely high motivation were pointed out as explanatory factors for the low incidence. Where casualties did occur treatment consisted of rest, tranquilization, and hypnotherapy. Some psychiatric depressions were noted after the battle and were considered acute exemplars of a general letdown. Psychiatric problems with prisoners of war and refugees are described along with methods used to deal with them. ((c)APA)

2D.002
Baker, N. G. (1981). Social work through an interpreter. *Social Work*, 391-397.

Refugee/Ethnic Group: Southeast-Asian

The current influx of Indochinese refugees into the United States has made the use of interpreters mandatory in many social services programs. Working through an interpreter has serious consequences for social work, however. The author reviews problems related to working with non-English-speaking clients and makes recommendations about hiring and working with interpreters. (AUTHOR)

2D.003
Bloombaum, M., Yamamoto, J., & James, Q. (1968). Cultural stereotyping among psychotherapists. *Journal of Consulting and Clinical Psychology, 32*, 99.

Refugee/Ethnic Group: Mexican; Japanese; Chinese; Jewish; Black

Structured interviews were conducted with 16 practicing psychotherapists to ascertain their attitudes toward Mexican-Americans, blacks, Chinese-Americans, Jews, and Japanese-Americans. Twenty-three percent of the responses were culturally stereotypic in terms of imputations of superstitiousness, impulse changeability, grasp of abstract concepts, and ability to distinguish between illusion and reality. Mexican-Americans were most commonly stereotyped, followed by blacks, Jews, CA, and JA in that order. More subtle stereotypic attitudes were noted in 79.2 percent of the responses. The Bogardus Scale was administered to determine the social distance between the therapists and respective minority groups. Aversion was greatest for blacks, the CA, MA, and

JA, while greatest tolerance was observed for intermarriage with Jews. Psychotherapist biases are thought to reflect cultural conditioning of American society itself. (HAAPIMH)

2D.004

Bokan, J. A., & Campbell, W. (1984). Indigenous psychotherapy in the treatment of a Laotian refugee. *Hospital & Community Psychiatry, 35*, 281-282.

Refugee/Ethnic Group: Southeast-Asian; Lao

Discusses the case of a 27-yr-old Laotian male suffering from psychotic depression, outlining some of the linguistic and cultural differences that often pose problems in the treatment of Southeast Asian patients and non-English-speaking patients in general. At first, the S was treated with traditional western intervention techniques, including medication and hospitalization. After 4 wks, there was some improvement, but the S still complained of somatic symptoms in his heart and stomach. A traditional healing ceremony from his native culture was then employed, and the S showed more improvement. He continued to take antidepressant medication as an outpatient and was doing well at a 1-yr follow-up. ((c)APA)

2D.005

Brower, I. C. (1980). Counseling Vietnamese. *Personnel and Guidance Journal, 58*, 646-652.

Refugee/Ethnic Group: Vietnamese

This general article is written for counselors working with Vietnamese students and their families. It provides specific information to help the counselor establish rapport, avoid misunderstandings, minimize transference dangers, and deal with Vietnamese attitudes toward sex roles and the individual-family relationship. One section of the article discusses explicit and implicit communications, with suggestions for the use of interpreters. (TAC)

2D.006

Chien, C., & Yamamoto, J. (1982). Asian-American and Pacific-Islander patients. In F. Acosta, J. Yamamoto, & L.A. Evans (Eds.), *Effective psychotherapy for low-income and minority patients*. (pp. 117-145). New York: Plenum Press.

Refugee/Ethnic Group: Asian-American; Pacific-Islander

The authors describe the socio-cultural characteristics, and attitudes toward mental health services of this population. They will utilize services for individuals who are psychotic, but will not ask for assistance for problems of life. Illness is usually concealed within the family, it is "bad blood," a sin. With respect to treatment, they are used to emergency, first come treatments, not appointments. They prefer minimal history taking and immediate relief, they are not used to talking therapies. A family oriented, active, authoritarian therapist is recommended. The text is punctuated with self-assessment exercises by topic area which are useful for training. All of the above must be considered against specific culture, generation and socio-economic status, etc. (NIMH)

2D.007

Egawa, J., & Tashima, N. (1982). *Indochinese healers in Southeast Asian refugee communities.* San Francisco: Pacific Asian Mental Health Research Project.

Refugee/Ethnic Group: Hmong; Mien; Cambodian; Vietnamese; Southeast-Asian

The authors studied refugee healing and health-seeking practices through in-depth interviews with Southeast Asian healers in the San Francisco Bay area. The text is divided into surveys of four ethnic groups, the Hmong, Mien, Cambodian, and Vietnamese. For each group, topics of discussion include: 1) traditional views on illness, 2) healer's qualifications, diagnostic methods and treatment, 3) description of patients and presenting problems, and 4) healing ceremony. The most prominent difference between western practitioners and indigenous healers resides in the methods categorizing health problems. In Western medicine illness may be explained in terms of physiological, mental causes or processes, while the diagnosis in folk medicine is primarily an identification of natural or supernatural origin. Where both Western and indigenous medical systems are utilized, Western medicine will be considered more effective for relief of symptoms and indigenous system more appropriate for treatment of the basic cause. The pattern is to see a Western doctor first and, if the problem persists, to then seek an indigenous cure. The appeal of traditional healers lies in their skills in conveying self-confidence and effecting a positive transference. Therapeutic approaches range from physical manipulation, use of medicine derived from herbs and animal parts, and performance of religious rituals to exorcise the afflicting spirit. The ceremony, as a therapeutic setting, offers that patient family support and opportunity for "catharsis," in contrast to the privacy and individual responsibility valued in Western practice. Use of indigenous healing systems has become, however, less frequent in the United States due to the competition from Western medicine, the unavailability of traditional herbs, and the geographic dispersion of the refugee communities. (NIMH)

2D.008
Evans, L. A., Acosta, F. X., & Yamamoto, J. (1982). Putting it all together. In F. X. Acosta, J. Yamamoto, & L. A. Evans (Eds.), *Effective psychotherapy for low-income and minority patients.* (pp. 147-159). New York: Plenum Press.

Refugee/Ethnic Group: General

Authors describe two programs designed especially for low-income minority patients (not developed for any specific group). The first, a patient orientation program, assists patients to understand mental health services, i.e., psychotherapy; "Tell it like it is!" The second is a minority issues seminar for therapists to discuss their experiences and feelings. (NIMH)

2D.009
Fox, R. (1984). The Indochinese: Strategies for health survival. *International Journal of Social Psychiatry, 30*, 285-291.

Refugee/Ethnic Group: Southeast-Asian

Describes a service program designed to facilitate the adjustment of Southeast Asian refugees in the U.S. that was based on the use of bilingual, bicultural staff; natural support networks; and education and outreach to increase accessibility of services. A survey of 47 clients (aged 5-64 yrs) served by this program showed that 79% of the Ss were severely depressed and showed psychosomatic complaints, feelings of hopelessness, or suicidal thoughts. For the most part, these problems were understandable reactions to the stress and deprivation associated with evacuation and resettlement. The most effective intervention was short-term, active-supportive counseling involving highly supportive relationships. Efforts to integrate this program with other social services were mostly unsuccessful. ((c)APA)

2D.010
Hiegel, J. P. (1983). Collaboration with traditional healers: Experience in refugees' mental care. *International Journal of Mental Health, 12*, 30-43.

Refugee/Ethnic Group: Southeast-Asian

The author describes his experiences in promoting cooperation between modern and traditional medicine in refugee camps in Thailand. The importance of involving traditional care givers in the medical and psychological aspects of mental health care is emphasized. ((c)APA)

2D.011
Hultkrantz, A. (1985). The shaman and the medicine man. *Social Science and Medicine, 20*, 511-515.

Refugee/Ethnic Group: Southeast-Asian

The present article discusses the terms medicine-man and shaman as used by scholars and scientists, and tries to arrive at a possible distinction between them. It is obvious that the two terms not only overlap but also cause confusion, even among shamanologists. They have consequently been used interchangeably by many scholars. By recourse to the North American ethnographic material in particular (which once was the source of this confusion) the author reaches the conclusion that the only way of separating the terms from each other is to approach the whole problem structurally as a two-levelled issue. It is then possible to differentiate between the shaman as primarily the mediator between the supernatural powers and man, and the medicine-man as primarily the curer of diseases through traditional techniques. The shaman may also be medically active when his expert knowledge of the supernatural disease agents is called for. This means that some shamans are medicine-men. Conversely, some medicine-men are shamans. (AUTHOR)

2D.012
Ilan, E. (1977). The treatment of a refugee child in a home for disturbed children and a follow-up 30 years later. *Psychoanalytic Study of the Child, 32*, 453-478.

Refugee/Ethnic Group: General

Reviews the life history of a 41-yr-old man who had been placed in residential treatment at age 11 yrs, when he was unable to make adjustments after both his parents were killed in World War II. It was found that his feeling of helpless paralysis had contributed to a learning disability and marital dysfunction, but that 30 yrs later he was functioning quite effectively at work and at home. He had managed to repress the horror and guilt from the past. ((c)APA)

2D.013
Ishisaka, H. A., Nguyen, Q. T., & Okimoto, J. T. (1985). The role of culture in the mental health treatment of Indochinese refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 41-64). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Key clinical issues identified over a nine year period at the Asian Counseling and Referral Services, Inc. are presented. The focus is on assisting clinicians who work with Southeast Asian clients to become aware of potential issues in treatment. A key consideration is an awareness of language and cultural differences. In addition, there needs to be a recognition of variability within the culture and the importance of the uniqueness of the individual. Clinicians who treat Indochinese clients should be aware of the following possible difficulties in the client engagement process: the initial encounter, history taking, and role induction. Basic errors which may occur in the assessment and treatment phase include the confusion of what constitutes normative cultural practice, behaviors, and beliefs with pathological process. The use of alternative explanations for dysfunction such as a stress framework, can alleviate some of the traditional shame associated with emotional problems. Interventions discussed are universalization, motivation, and medication. (TAC)

2D.014
Jack, A. (1980, October). The shaman and the psychiatrist. *East West Journal*, 36-37.

Refugee/Ethnic Group: Cambodian

A sympathetic report of the use of traditional [non-Western] medicine in the refugee camp Sakeo, where a program was set up by the psychiatrist Jean-Pierre Hiegel. (CB-SARS)

2D.015
Kinzie, J. D. (1978). Lessons from cross-cultural psychotherapy. *American Journal of Psychotherapy*, *32*, 510-520.

Refugee/Ethnic Group: General

Author provides brief vignettes of cases to identify techniques useful in cross-cultural psychotherapy: 1) sensitive use of the medical model, 2) use of nonverbal communication, and 3) sensitivity to the phenomenological aspects of the patients's life. (NIMH)

2D.016
Kinzie, J. D. (1981). Evaluation and psychotherapy of Indochinese refugee patients. *American Journal of Psychotherapy*, *35*, 251-261.

Refugee/Ethnic Group: Southeast-Asian

Based on clinical experience with 70 Indochinese refugees, the author developed specific approaches to diagnosis and treatment of these patients. Problem areas include the patient's concentration on physical symptoms, horror stories, and taboo subjects difficult for the patient to discuss. Cultural attitudes and stresses of past and present changes in environment and life-style affect treatment. ((c)APA)

2D.017

Kinzie, J. D. (1985). Cultural aspects of psychiatric treatment with Indochinese refugees. *The American Journal of Social Psychiatry*, *5*, 47-53.

Refugee/Ethnic Group: Southeast-Asian

This paper describes some basic values of Indochinese refugee patients and how these values may conflict with prevailing values of American psychotherapists. Based upon psychiatric treatment of over 350 Indochinese refugees, a medical approach is advocated with emphasis on thorough history taking and reduction of symptoms. A long-term supportive approach to therapy is considered the most helpful. Problem areas in therapy are discussed. When appropriate approaches, with the support of trained mental health counselors, are used, Indochinese do utilize psychiatric services. (AUTHOR)

2D.018

Kinzie, J. D. (1985). Overview of clinical issues in the treatment of Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 113-135). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian; Cambodian

Cultural aspects of psychotherapy and psychopharmacology for Southeast Asian refugees are presented, based on the author's experiences at the Department of Psychiatry, Oregon Health Services University. A section on posttraumatic stress disorder is included. In the provision of comprehensive services to Southeast Asians, it is essential to provide a full range of services with a staff experienced with refugee problems. This includes a psychiatric staff who can offer modern psychiatric services and well-trained counselors from the various ethnic groups. Therapists need to be aware of the differences in culture and values of Southeast Asians and Americans and change their procedures and treatment accordingly. The use of psychotropic medicine has been found to be generally effective when treating Southeast Asians, but the dosage needs to be continually evaluated. Suggestions are given to improve the sometimes poor compliance rate.

Therapeutic approaches are suggested to help in the difficult diagnosis and treatment of posttraumatic stress disorder, found most often in Cambodians. (TAC)

2D.019
Kinzie, J. D. (1986). The establishment of outpatient mental health services for Southeast Asian refugees. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 217-231). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Southeast-Asian

This chapter describes an outpatient mental health clinic for Southeast Asian refugees. The author discusses important cultural issues and the necessity of bilingual interpreters. The different aspects of the initial interview are presented, as well as a description of the clinic population with illustrative case histories. Future trends and outlooks are discussed and the clinic is suggested as a resource in transcultural psychiatry. (TAC)

2D.020
Kinzie, J. D., & Manson, S. (1983). Five years' experience with Indochinese refugee psychiatric patients. *Journal of Operational Psychiatry, 14*, 105-111.

Refugee/Ethnic Group: Southeast-Asian

Describes the results of the first 5 years of operation of a clinic that was designed to test the feasibility of providing appropriate and effective mental health services to Indochinese refugees. An overview of the clinic and its treatment philosophy and procedures are presented, and the general characteristics of the patient population, referral sources, and presenting complaints are considered. Diagnostic patterns are described and compared to a group of non-Southeast Asian refugee patients. ((c)APA)

2D.021
Kinzie, J. D., Tran, K. A., Breckenridge, A., & Bloom, J. D. (1980). An Indochinese refugee psychiatric clinic: Culturally accepted treatment approaches. *American Journal of Psychiatry, 137*, 1429-1432.

Refugee/Ethnic Group: Southeast-Asian

Describes the establishment of a weekly psychiatric clinic for Indochinese refugees in the US. A flexible approach to treatment was adopted that resulted in the use of different forms of therapy and special emphasis on the medical approach of the physician, a role familiar to Indochinese patients. ((c)APA)

2D.022
Kitano, H. H. L., & Natsushima, N. (1981). Counseling Asian Americans. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures (rev. ed.).* (pp. 163-180). Honolulu, HI: The East-West Center.

Refugee/Ethnic Group: Southeast-Asian

Perspectives on Asians as a minority group in the United States are given, along with an explanation of inequality. General background information on the Chinese, Japanese, Koreans, Filipinos, and Vietnamese is presented. Issues which may be culturally specific are identified in terms of counseling and therapy. (NIUCSEAS/TAC)

2D.023
Kleinman, A. (1975). The symbolic context of Chinese medicine: A comparative approach to the study of traditional medical and psychiatric forms of care in Chinese culture. *American Journal of Chinese Medicine, 3,* 103-124.

Refugee/Ethnic Group: Chinese

This article explores a distinctly different aspect of Chinese medicine, and of health care in Chinese culture, from that receiving most attention and serious study at present in this country. It examines the symbolic structure and significance of illness and care in the Chinese context by a) applying concepts developed in anthropology and the cross-cultural study of medicine and psychiatry; b) examining recent studies of folk and popular forms of health care in contemporary Chinese communities; and c) raising questions about the cognitive structure, cultural background, and bio-social significance of traditional Chinese healing beliefs and practices. An attempt is made to place this analysis in a comparative framework, so that Chinese cases can be related to health care systems in other cultural settings. (AUTHOR)

2D.024
Kline, F., Acosta, F. X., Austin, W., & Johnson, R. G. (1980). The misunderstood Spanish-speaking patient. *American Journal of Psychiatry, 137,* 1530-1533.

Refugee/Ethnic Group: Hispanic

The authors examined the reactions of Spanish-speaking patients and of therapists to initial therapy interviews conducted with or without an interpreter. Twenty-one patients who used an interpreter, 40 bilingual patients, and the 16 psychiatric residents who conducted the interviews completed questionnaires aimed at evaluating therapy and communication effectiveness. A number of patient and therapist perceptions were significantly different. Patients interviewed with interpreters felt understood and helped and wanted to return, whereas the therapists responded that patients seen with interpreters felt less understood and less helped and did not want to return. The authors recommend more bilingual/bicultural therapists and an effort to help present therapists realize how valuable their efforts are with patients who need an interpreter. (TAC)

2D.025
Looney, J. G., & Harding, R. K. (1986). Mental health consultation in refugee camps. In C. L. Williams, & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 205-216). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Cambodian; Vietnamese

The authors describe a psychiatric consultation service for Cambodian and Vietnamese refugees at the Camp Pendleton Marine Base in southern California. A refugee camp was established there in April, 1975, after the fall of the government of South Vietnam. The assessment procedures used by the consultants are described, along with the findings and recommendations. Several standardized questionnaires were used: the Recent Life - Change Questionnaire, Cornell Medical Index, and Self - Anchoring Scale. Primary, secondary, and tertiary prevention strategies are discussed. The authors noted difficulties in implementing some of their recommendations. (TAC)

2D.026
Loveridge, D. (1982). Communication between people. *Hong Kong Psychological Society Bulletin*, *9*, 19-26.

Refugee/Ethnic Group: Vietnamese; Chinese; Thai

The author discusses client-therapist communication and cross-cultural work on familial communication. Western familial communication is compared to that of Chinese, Vietnamese, and Thai communication. Work with Vietnamese refugees is briefly presented. ((c)APA)

2D.027
Marcos, L. R. (1976). Bilinguals in psychotherapy: Language as an emotional barrier. *American Journal of Psychotherapy, 30,* 552-560.

Refugee/Ethnic Group: General

The English-speaking clinician frequently evaluates and treats patients whose mother tongue is not English. This paper summarizes some of the evidence supporting an emotional-detachment effect associated with speaking in a second language and describes its implications for the psychotherapy of this population. (TAC/AUTHOR)

2D.028
Marcos, L. R. (1976). Linguistic dimensions in the bilingual patients. *The American Journal of Psychoanalysis, 36,* 347-354.

Refugee/Ethnic Group: General

This paper summarizes major linguistic aspects or dimensions of the bilingual individual and describes the most common implications of these dimensions for the process of dynamic psychotherapy. Four dimensions are studied: a) language dominance - the degree of linguistic competence or command an individual has of each language, from proficient to subordinate; b) language acquisition context - whether both languages were learned in the same context or different contexts, labeled compound or coordinate; c) current language use context - refers to the specific domains or situations in which bilinguals use each language, from specialized to unspecialized; d) language semantic features - the degree of semantic consistency and congruency between the two languages, ranging from compatable to incompatable. The implications for psychotherapy of the language barrier, language independence, and language translatablity are discussed with relation to the four dimensions. Misperceptions of the bilingual patient may be minimized if these dimensions are considered. (TAC)

2D.029
Marcos, L. R., & Alpert, M. (1976). Strategies and risks in psychotherapy with bilingual patients: The phenomenon of language independence. *American Journal of Psychiatry, 133,* 1275-1278.

Refugee/Ethnic Group: General

The presence of two separate languages, each with its own lexical, syntactic, semantic, and ideational components, can complicate psychotherapy with proficient bilingual patients. If only one language is used in therapy, some aspects of the patient's emotional experience may be unavailable to treatment; if both languages are used, the patient may use language switching as a form of resistance to affectively charged material. The authors suggest that monolingual therapists should carefully assess the degree of language independence in bilinguals in order to minimize its impact on therapy. They conclude that study of bilingual patients may provide important insights into the nature of the therapeutic process. (TAC/AUTHOR)

2D.030

McMichael, J. K. (1976). Psychiatry in Vietnam. In J. K. McMichael (Ed.), *Health in the Third World: Studies from Vietnam.* (pp. 322-327). Nottingham, England: Spokesman Books.

Refugee/Ethnic Group: Vietnamese

This chapter is a reproduction of an interview given by Professor Erich Wulff, Co-director of the Social Psychiatry Department of the Faculty of Medicine in Hanover, Germany, to the Franco - Vietnamese Association, in Paris, 1970. Topics discussed included Vietnamese psychiatry compared to European, incidence of psychiatric disease, and kinds of treatment. (TAC)

2D.031

Muecke, M. A. (1983). In search of healers--Southeast Asian refugees in the American health care system. *Western Journal of Medicine, 139*, 835-840.

Refugee/Ethnic Group: Southeast-Asian

Healing is the alleviation of sickness, which includes both medically defined problems of pathophysiology (disease) and personal definitions of not being well (illness). Refugees from Southeast Asia now have a special need for healing because their health problems are changing from those of concern to public health, which are well documented and for which there are known effective treatments, to those that are primarily a personal concern and that are difficult to diagnose and treat effectively because of their chronic nature and their cultural and emotional components. The finding among refugees of medical complaints for which there is no identifiable medical cause is explained by cultural tendencies in Southeast Asia that promote focusing on somatic symptomatology and by a delayed somatic response to refugee trauma. To prevent escalation of medical intervention, physicians need to be sensitive to Southeast Asians' attitudes toward health and their expectations and apprehensions regarding Western medicine. (MEDLINE/AUTHOR)

2D.032
Pedersen, P. B., Draguns, J. G., Lonner, W. J., & Trimble, J. E. (Eds.). (1981). *Counseling across cultures.* Honolulu: The East-West Center.

Refugee/Ethnic Group: General

The chapters in this volume deal with ethnic and cultural considerations as they emerge both in recurrent universal themes and in their unique characterizations. Consideration has been given, for counselors and therapists, to the basic issues, previous research, and practical applications in delivering culturally sensitive mental health services. Part One provides an introduction and overview to cross-cultural counseling and therapy. Part Two describes some general concerns in counseling across cultures. Part Three identifies specific ethnic and cultural considerations of counseling across cultures. Part Four reviews the problems of cross-cultural research and practical considerations of cross-cultural counseling. Chapters on counseling Asian-Americans, Chicanos, and American Indians are included. (NIUCSEAS/TAC)

2D.033
Sue, S., Wagner, N., Davis, J. A., Margullis, C., & Lew, L. (1976). Conceptions of mental illness among Asian and Caucasian-American students. *Psychological Reports, 38*, 703-708.

Refugee/Ethnic Group: Asian-American

The attitudes and beliefs of 62 Asian American and 81 Caucasian college students toward mental illness were examined. After controlling for demographic and background variables between students, a number of significant ethnic differences emerged. These results were interpreted in the context of Asian subcultural values and implications for psychotherapeutic practice were drawn. (AUTHOR)

2D.034
Szapocznik, J., Scopetta, M. A., & King, O. E. (1978). Theory and practice in matching treatment to the special characteristics and problems of Cuban immigrants. *Journal of Community Psychology, 6*, 112-122.

Refugee/Ethnic Group: Cuban

Widespread mental health problems in the Cuban immigrant population of Miami present problems for the providers of mental health services in the area, because the Cubans have seriously underutilized the established Anglo American-oriented treatment programs. Based on research and experience at Encuentro-Spanish Family Guidance Clinic in Miami, the authors suggest treatment procedures which match the special characteristics, problems, values, and client expectations of this population. A review of the literature supports this recommendation. Studies by the clinic's Latin paraprofessional counselors revealed cultural variables in the Miami Latin population which would be relevant for a culturally sensitive treatment model. These include: 1) a preference for lineal relationships based on hierarchial or vertical structures; 2) a strong family influence; 3) an orientation for avoiding the complex network of social systems in the host environment; 4) a crisis-oriented (present-time orientation) approach to treatment and rehabilitation. Acculturation problems facing Cuban immigrant families and their implications for treatment are discussed. The authors conclude that ecological structural family therapy is a treatment of choice for dysfunctions of Cuban immigrant families. (HHMHDB-UCLA)

2D.035
Toupin, E. S. W. A. (1980). Counseling Asians. *American Journal of Orthopsychiatry, 50*, 76-86.

Refugee/Ethnic Group: Asian

Article on cultural factors (American and Asian) and their relevance to individual behavior and interpersonal relations. Dominant values of Asians, conflicting cultural values and ways to resolve those conflicts are discussed. Implications of cultural norms for psychotherapy are discussed. (TAC)

2D.036
Tsui, P., & Schultz, G. L. (1985). Failure of rapport: Why psychotherapeutic engagement fails in the treatment of Asian clients. *American Journal of Orthopsychiatry, 55*, 561-569.

Refugee/Ethnic Group: Asian

The extent to which relatively unassimilated Asian clients can utilize traditional psychotherapy is likely to depend upon the ability of therapists to understand cultural differences and to adapt their clinical styles accordingly. Common errors made by non-Asian therapists attempting to engage Asians in psychotherapy are identified and appropriate therapeutic strategies are suggested. (AUTHOR)

2D.037
Tung, T. M. (1972). The family and the management of mental health problems in Vietnam. In W. P. Lebra (Ed.), *Transcultural research in mental health.* (pp. 107-113). Honolulu: University Press of Hawaii.

Refugee/Ethnic Group: Vietnamese

Author's impressions and observations as a psychiatrist in Vietnam dealing with families of mentally ill patients are presented. In particular, the common initiation of treatment by family members, the attitude towards hospitalization, and the psychiatrists' reliance on family members for auxillary support, are examined. The beneficial aspects of the family's influence are discussed, as well as the potential drawbacks their involvement may present. (SBIMHPIISF/TAC)

2D.038
Westermeyer, J. (1973). Folk treatments for opium addiction in Laos. *British Journal of Addictions*, *68*, 345-349.

Refugee/Ethnic Group: Lao

This paper discusses a study of 40 opium addicts in Laos (29 of whom had attempted to stop their addiction) to see whether they sought and received folk treatment for their opium addiction. The findings indicate that a variety of folk remedies were employed, some in combination with others. These remedies included: "cold turkey" withdrawal, herbal medication as a substitute, group process (support groups), milieu care, decreasing dosage amounts, switching from smoking to eating opium (less expensive), and changing to other drugs (alcohol or barbiturates). Many of these traditional treatment methods have their analogues in "modern" medical treatments in the U. S. (TAC)

2D.039
Westermeyer, J. (1973). Lao Buddhism, mental health, and contemporary implications. *Journal of Religion and Health*, *12*, 181-188.

Refugee/Ethnic Group: Lao

All of the major psychiatric disorders can be encountered among the people of Laos, yet there are no mental health professionals or modern methods of psychiatric treatment. The mental health problems are met with a variety of traditional resources: the extended family and kinship group, traditional herb doctors and spririt healers, village leaders, and members of the clergy. Religious rituals ("baci") are especially supportive during transitional periods of the person's life. Western society could benefit by adopting home-centered rituals or "rites of passage" to provide the emotional support and continuity needed during life's crises. (TAC)

2D.040
Westermeyer, J. (1976). Clinical guidelines for the cross-cultural treatment of chemical dependency. *American Journal of Drug and Alcohol Abuse, 3*, 315-322.

Refugee/Ethnic Group: General

Clinicians should be skilled in work with their ethnic peers before attempting cross-cultural treatment. Acquiring cross-cultural sensitivity involves regression to childlike openness for new values, attitudes, and behaviors. Members of the ethnic group can orient the clinician by discussion, suggested readings, and invitations to their homes and ritual events. Work should begin slowly, with regular consultation from ethnic peers of the patient. Special transference issues involve parent-child transactions and the "Messianic countertransference." Clinicians must maintain their primary commitment to the patient and to the patient's social resources, rather than to an institution not responsible to the patient population. (AUTHOR)

2D.041
Westermeyer, J. (1976). Collaboration with traditional healers: New colonialism and new science. *Conch, 8*, 96-107.

Refugee/Ethnic Group: General

The "collaborative" approach on the part of both the modern health care worker and the traditional healer is the most beneficial approach for the patient, the family, and probably the society when working in culturally diverse settings. To be effective, the modern health care worker needs to face certain individual, ethical, and political issues: Why am I working with these people? Why is this agency funding me to work among the people receiving health care? What do these people want me to do for them? (TAC)

2D.042
Westermeyer, J. (1977). Psychiatry in Indochina: Cultural issues during the period 1965-1975. *Transcultural Psychiatric Research Review, 14*, 23-28.

Refugee/Ethnic Group: Cambodian; Lao; Vietnamese

Author provides information, primarily from his own experiences and limited literature, on the nature of psychopathology in Vietnam, Cambodia and Laos. Schizophrenia is the most frequent problem followed by affective psychoses and psychoses associated with acute illness. Also described are folk theories and treatments of psychiatric disorders and status of modern treatment, i.e., 1975. (NIMH)

2D.043
Westermeyer, J. (1978). An addiction treatment program in Laos: The first year's experience. *Drug and Alcohol Dependence*, *3*, 93-102.

Refugee/Ethnic Group: Lao

In late 1972 a treatment program for narcotic addicts was begun in Vientiane, Laos. Medical and social treatment modalities were emphasized: withdrawal from narcotic drugs, care for chronic health problems, a highly structured milieu program with explicit rules, and careful discharge planning with family counseling. Patients were accepted on a voluntary basis only. The first year's patient population were mostly married, employed, addicted to opium, and from rural areas. They comprised a diversity of ethnic groups. A smaller group of young, single, male heroin addicts (a type of addict new to Laos) also appeared in this group of patients. This treatment program proved highly acceptable to a large number of addicted people from various age groups and ethnic backgrounds. It was successfully undertaken by medical personnel who had minimal or no experience in the addiction field prior to work at this facility. Among opium addicts, twice-a-day methadone dosage for withdrawal treatment was superior to once-a-day dosage. Opium addicts required a longer detoxification regimen than did heroin addicts. (AUTHOR)

2D.044
Westermeyer, J. (1979). Medical and nonmedical treatment for narcotic addicts: A comparative study from Asia. *The Journal of Nervous and Mental Disease*, *169*, 205-211.

Refugee/Ethnic Group: Lao

Narcotic addicts from Laos were treated under governmental auspices in two settings: a Buddhist monastery in Thailand, and a medical facility in Laos. Treatment at the monastery included "cold turkey" withdrawal, a herbal emetic, prayer and religious exortation. Treatment at the medical program consisted of methadone detoxification, care of associated medical conditions, counseling, education regarding addiction, and group discussions. Addicts voluntarily selected one of the alternative modalities. Cost per individual treated was $150 at the medical facility, and about one third that amount at the monastery. Those choosing the more traditional monastery program had an older mean age and included a greater proportion of females and ethnic Lao people. Expatriate Asians (an educated, urban group) and tribal addicts (predominantly non-Buddhist) were more numerous at the medical facility. Small differences were noted in addiction history between the two groups; these were probably due to the demographic differences between the groups. Follow-up evaluation on representative samples was conducted 6 to 18 months postdischarge using abstinence as a criterion. Correction was made for regional differences in opium availability and cost. No difference was found in abstinence rates between the monastery and medical programs. Mortality among addicts over age 60 years was considerably higher at the monastery than at the medical facility. Subjective evaluation of the treatment experience at the temple was positive among Lao addicts (a group ethnically similar to the Thai), but negative among tribal addicts. Over time fewer addicts chose the monastery program, while the medical program became increasingly popular as a treatment resource. (AUTHOR)

2D.045
Westermeyer, J. (1980). Treatment for narcotic addiction in a Buddhist monastery. *Journal of Drug Issues*, *10*, 221-247.

Refugee/Ethnic Group: Lao

During the period 1972-74, approximately 3,000 narcotic addicts from Laos were sent to a Buddhist monastery in Thailand (Wat Than Kha Bok). This massive effort was initiated by a devout Buddhist woman. It was funded from a variety of sources including a Buddhist woman's auxiliary in Laos, an international organization funding philanthropic activities, the Ministry of Health in Laos, the U.S. Agency for International Development, and the addicted people themselves. These particular data were obtained from 1,192 addicts admitted for treatment during 1973. Data were collected by trained employees in the Ministry of Social Welfare, using a format employed for previous research by the author in Laos. Demographic characteristics of the 1,192 people in the sample are presented. Clinical information includes their age at addiction and the duration of their addiction. The sudden waxing of addict interest in this non-medical (even anti-medical) program is described, along with its subsequent waning. A limited evaluation of treatment outcome was conducted by the author in villages of Laos. These data are presented, along with mortality associated with the treatment. (AUTHOR)

2D.046
Westermeyer, J. (1983). Treatment strategies for mental disorder in a society without psychiatric resources. *Medical Anthropology*, *7*, 17-28.

Refugee/Ethnic Group: General

This paper discusses a study undertaken in Laos to describe treatment methods in a developing country without psychiatric resources. Thirty-five subjects, identified through a community survey of four villages as "baa" (the folk term for insane or crazy) were studied with regard to the type of care they received from their families, traditional healers, Buddhist monks, and general medical providers. The findings indicate that families, traditional healers, and monks had little success in treating these individuals, probably because of the severity of the illnesses in most of the subjects. (TAC)

2D.047
Westermeyer, J. (1986). Indochinese refugees in community and clinic: A report from Asia and the United States. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 113-130). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Southeast-Asian

The author provides observations from his 20 years of experience with Indochinese refugees in both the United States and Southeast Asia. He begins with a contrast of refugee movements among Laotians, noting similarities and differences in their behavior in Laos and the United States. A description is provided of the psychiatric clinics established at the University of Minnesota Hospital for Hmong and Lao refugees. Findings from research studies of the Hmong are used to provide suggestions about who is at greatest risk for psychiatric disorders. Suggestions for early intervention and prevention efforts are also made. (TAC)

2D.048
Westermeyer, J., & Soudaly, C. (1984). Lessons from a methadone treatment program in Laos, 1972-1975. *Drug and Alcohol Dependence*, *13*, 89-106.

Refugee/Ethnic Group: Lao

This paper discusses a methadone treatment project in Laos that was first conceived in late 1971, and then terminated in 1975 when a change in government occurred. A large number of opium addicts from Northern Laos became refugees as a result of the Indochinese war. As refugees, their drug addiction came to the attention of governmental agencies which responded, in part, by the establishment of the methadone treatment program. This article examines the treatment program in detail. (TAC)

2D.049
Westermeyer, J., & Walker, D. (1982). Approaches to treatment of alcoholism across cultural boundaries. *Psychiatry Annals*, *12*, 434-439.

Refugee/Ethnic Group: General

This article discusses the skills needed for mental health professionals to work effectively with minority populations in the treatment of alcoholism and drug abuse. (TAC)

2D.050
Yamamoto, J. (1978). Therapy for Asian Americans. *Journal of the National Medical Association*, *70*, 267-270.

Refugee/Ethnic Group: Asian-American; Pacific-Islander

Author states that Asian Americans and Pacific Islanders underutilize mental health services due to a combination of the attitudes/culture brought from their homeland and their prejudice against the mentally ill and mental health services. Also states other's findings that suggest that Asians tend to seek help from mental health services only when they are seriously disturbed. It is recommended that the object of therapy be on how to learn to cope with family support, rather than individualism. In this context the patient's family could be seen frequently. The therapist, perferably bicultural, should explore role conflicts and understand the close family ties and healthy mutual interdependency. Also, the therapist needs to be aware of the fact that he/she is viewed as an authority figure. (NIMH)

2D.051
Yamamoto, J., & Yap, J. (1984). Group therapy for Asian Americans and Pacific Islanders. *P/AAMHRC Research Review*, *3*, 1-3.

Refugee/Ethnic Group: Asian-American; Pacific-Islander

The Asian Pacific Counseling and Treatment Center is a county- and state-funded mental health center serving Southeast Asians in the Los Angeles area. This paper discusses the services provided at the center, comparing and contrasting these services with those one would find at a center serving primarily non-minority clients. (TAC)

The following references (identified by their bibliography number) also contain some information relevant to category **2D**:

1A.023, 1A.032, 1A.054

1D.042

1E.045

2A.001, 2A.002, 2A.007, 2A.010, 2A.015, 2A.026, 2A.028, 2A.044, 2A.056, 2A.059, 2A.060, 2A.073, 2A.075

2B.009, 2B.022, 2B.035, 2B.036, 2B.044, 2B.045

2F.003, 2F.005, 2F.009, 2F.016, 2F.018, 2F.019, 2F.021, 2F.022, 2F.025, 2F.026

2G.011

3A.002, 3A.013, 3A.014, 3A.019

3C.001

3E.002, 3E.006, 3E.007

The reader is advised to refer to the above references for more information regarding **Treatment**.

2E. Prevention, Promotion, and Outreach ...

2E.001
Barger, W. K., & Truong, T. V. (1978). Community action work among the Vietnamese. *Human Organization*, *37*, 95-100.

Refugee/Ethnic Group: Vietnamese

In the resettlement of Vietnamese refugees in the United States, about 175 Vietnamese were settled in Lexington, Ky, & in nearby small towns. Community action work among these refugees is described on the basis of participation & observation. Two major steps were the legal incorporation of the Vietnamese Association & the establishment of an Oriental food store as a first step in establishing businesses. Important principles followed in this work included establishing communication & mutual respect, identifying areas of mutual involvement, negotiating roles, identifying goals, assessing the community, & creating action teams. Such teams can provide a variety of services to community groups. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2E.002
Bliatout, B. T., Ben, R., Do, V. T., Keopraseuth, K. O., Bliatout, H. Y., & Tsanh-Tsing Lee, D. (1985). Mental health and prevention activities targeted to Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 183-207). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Examples of preventive intervention methods which are acceptable and appropriate for Southeast Asians are described. Psychological and emotional stress points which confront the elderly, adult males and females, and adolescents and children in the resettlement process are identified. Three basic components necessary for any mental health prevention program designed for Southeast Asians are enhancement of the natural social support system, enhancement of basic adaptive social skills, and enhancement of pride in one's culture, family and self. Consideration in implementing mental health prevention efforts for Southeast Asians includes ethnic issues, identification and orientation of key community leaders, and decisions about the management of the program. Resources in the refugee community such as Mutual Assistance Associations (MAA's) are identified. Another resource which should be recognized in the implementation of a mental health prevention program is the utilization of the elders. This would establish a sense of identity and of orderly progress while providing meaning and satisfaction to the lives of the elders. (TAC)

2E.003

Burton, E. (1983). Khmer refugees in Western Massachusetts: Their impact on local communities. *Migration Today, 11*, 29-34.

Refugee/Ethnic Group: Cambodian

'Cluster resettlement' is the name of a new approach to refugee resettlement, developed by Peter Pond of the Lutheran Service Association, which has resettled over a thousand Khmer refugees in the Northeastern United States since 1973. Pond's system places manageable groups of Khmer refugee families close together in one town or area, where a sufficient number of church or other community groups are willing to co-operate in the work of sponsorship. The clustering of refugee families creates a small ethnic community providing emotional support and reducing culture shock; and the clustering of sponsoring groups, with its wider community involvement, makes less difficult such tasks as finding employment and housing, arranging English language and job training programs, organizing welfare assistance etc. This article discusses four towns in Hampshire County, Massachusetts, which have been involved in this program since 1982. Because of socio-economic differences between sponsors, and differences in regional problems, i.e., employment, housing, and chânges in American attitude from place to place, the approach of each town is different. For example, one working-class town has already found employment for all its refugee husbands/fathers. Though it is difficult to evaluate the success of the experiment at such an early stage, it is significant that there has been only one instance of secondary migration out of the twenty families involved, and some groups have already agreed to sponsor the extended family of a Khmer family now in the area. (REFUGEE ABSTRACTS)

2E.004

Chappell, H. L., & Layton, J. R. (1976). The Vietnamese learner among us. *School and Community, 62*, 20-21, 33.

Refugee/Ethnic Group: Vietnamese

The authors outline some basic foundations of education useful when teaching Vietnamese children and adults the English language. These basic foundations can produce non-frustrating and/or non-anxiety producing situations where teachers help students develop the necessary skills to become independent learners. Teachers are defined as the educational leaders in a community, and as such, they are educators of the community and its organizations, as well as educators of the Vietnamese student. Included in the article is a list of eleven major and most important things known about teaching English as a second language. (NIUCSEAS)

2E.005
Eddy, J. (1978). Project AID: College and business working together. *Journal of College Student Personnel, 19*, 474.

Refugee/Ethnic Group: General; Southeast-Asian

Brief description of Project AID (Assistance Indochina Development) in Illinois for 1976-1977. Four major areas of need were focused upon: (1) English as a second language, (2) on-the-job training, (3) basic principles of job skills, and (4) career counseling and career awareness. (NIUCSEAS)

2E.006
Harmon, R., & Robinson, C. (Eds.). (1981). *Outreach, information and referral.* Washington, DC: Indochina Refugee Action Center.

Refugee/Ethnic Group: Southeast-Asian

Author describes general programs for three types of outreach: 1) to individual - care must be taken for confidentiality, primarily from referrals; 2) refugee community - groups, use influential members; and 3) agencies - develop interagency cooperation and communication. The above programs are not specific to mental health but would apply. There is a discussion of information services. (NIMH)

2E.007
Harmon, R., and Robinson, C. (Eds.). (1981). *Social adjustment services.* Washington, DC: Indochina Refugee Action Center.

Refugee/Ethnic Group: Southeast-Asian

Author defines social adjustment for the refugee when 1) there is minimum stress due to cultural misunderstanding and conflicts and 2) a normal degree of self-reliance. There is a brief description of minimal aspects of mental health services. Particular mention of crisis intervention and of need for specific areas to be included in cross-cultural awareness training for mental health providers. In general, a good overall outline of consumer training needs is provided. (NIMH)

2E.008
Kelly, G. P. (1978). Adult education for Vietnamese refugees: Commentary on pluralism in America. *The Journal of Ethnic Studies, 5*, 55-64.

Refugee/Ethnic Group: Vietnamese

English-as-a-second-language classes for Vietnamese refugees at the Fort Indian Town Gap relocation camp are examined. Although these classes' explicit purpose was to teach English to the Vietnamese, they implicitly taught what the United States teachers perceived as the new lifestyle that the refugees would be acquiring. The courses did not recognize the necessity for cultural pluralism, that a Vietnamese-American culture needed to be developed. United States stereotypes regarding division of labor, sex roles, & occupational roles were transmitted to the refugees that were contrary to the Vietnamese ways (as well as being contrary to many Americans). The Vietnamese did not have input into the development of the English classes; therefore, they were only taught what the Americans chose to teach. Consequently, classes were often irrelevant to Vietnamese culture. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2E.009

Khoa, L. X., & Bui, D. D. (1985). Southeast Asian mutual assistance associations: An approach for community development. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 209-224). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

The role of Mutual Assistance Associations (MAA's) in facilitating the adjustment process for refugees is explored. The long history of community organizing for mutual assistance and solidarity by the Indochinese can provide a source of guidance and support for refugees in the United States. A ten year longitudinal study of the 800 Southeast Asian MAA's, conducted by the Indochina Resource Action Center (IRAC), categorizes the purpose of these groups into five areas: cultural and spiritual integrity; resettlement service provision; special interest; economic development; and advocacy and political action. The distribution of MAA's by state and type is presented, along with data on the distribution of MAA's by ethnic group and type. Differences between Southeast Asians and Westerners, such as the social structure organization, are important to keep in mind. Future activities, observations and suggestions which emerged from the 1980-1981 national survey of MAA's by IRAC are also presented. (TAC)

2E.010

May, J. (1981). The Vermont experience: Planned clusters in snow country. *Journal of Refugee Resettlement*, *1*, 31-35.

Refugee/Ethnic Group: Lao

The author gives a brief and personal description of the cluster approach used in Vermont for Laotian refugee resettlement. (TAC)

2E.011
Munnell, K. (1985). The youth and adult cultural orientation programs: How they can benefit each other. *Passage: A Journal of Refugee Education*, *1*, 13-14.

Refugee/Ethnic Group: General

In the U. S., the school experience can be an alienating force between the refugee parent and child. This article demonstrates how the Intensive Program curricula for adolescents and adults can be linked, so that the school can be seen as a bridge between parent and child. (AUTHOR)

2E.012
Nann, R. C., & To, L. (1982). Experiences of Chinese immigrants in Canada: Building an indigenous support system. In R. C. Nann (Ed.), *Uprooting and surviving: Adaptation and resettlement of migrant families and children.* (pp. 155-163). Dordrecht, Holland: D. Reidel.

Refugee/Ethnic Group: Chinese; Southeast-Asian

The experiences of an ethnic community organization, The United Chinese Community Enrichment Services (or SUCCESS), which was developed to assist the Chinese immigrant and Southeast Asian refugee resettlement process in Canada are examined. Program has focused on problems encountered by non-English speaking Chinese immigrants and refugees; these include informal drop-in centers, adult education, social networks and group programs, and research. Program outcomes and limitations are also presented. (POPLINE/TAC)

2E.013
Owan, T. C. (1985). Southeast Asian mental health: Transition from treatment services to prevention -- A new direction. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 141-167). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Prevention intervention programs and research are described as an alternative approach to mental health services to Southeast Asians. The limited success of conventional Western mental health treatment points to the need for the development of more effective services for minority clients. Problems discussed include the differential and ineffective treatment methods and the underutilization of mental health services by minorities. The utilization of the community based model and the mass media as new approaches offer the opportunity to reach populations generally excluded from mental health services. The community based model emphasizes early intervention, involvement of large numbers of people, belief in people's ability to help themselves, problem - solving and competence training, and the use of social support systems. The key elements of the community model are the personal, social support and institutional units. The promotion of psychological health and the forestalling of psychological distress are the goals of primary prevention. (TAC)

2E.014
Rahe, R. H., Looney, J. G., Ward, H. W., Tung, T. R., & Liu, W. T. (1978). Psychiatric consultation in a Vietnamese refugee camp. *American Journal of Psychiatry, 135*, 185-190.

Refugee/Ethnic Group: Vietnamese

Describes psychiatric consultation provided by the authors to medical personnel in charge of a Vietnamese refugee camp in California. Although the emergency measures that supplied clothing, food, shelter, and medical care to nearly 60,000 refugees were immensely successful, consultation was requested to assist with selected mental health problems. The recommendations of the consultation team were related to the stage of camp development. Early recommendations concerned easing adaptation to the camp setting; later efforts included creating a psychiatric crisis clinic and carrying out a mental health survey on a random sample of refugees. Results of this survey helped camp directors to understand how refugees responded to the camp experience. ((c)APA)

2E.015
Rogg, E. (1971). The influence of a strong refugee community on the economic adjustment of its members. *International Migration Review, 5*, 474-481.

Refugee/Ethnic Group: Cuban

The economic adjustment of Cuban refugees involves the examination of the following major theoretical consideration: the significance of the development of a strong ethnic community for the cultural assimilation of refugees. Contemporary theory suggests that the formation of a strong concentrated refugee community where immigrants are able to perpetuate some features of their native culture is favorable to their adjustment but slows down their acculturation in the short-run. Hour long interviews with 250 heads of Cuban families living in West New York were conducted in Spanish. Respondents were selected using a simple random sample from a list of 2,018 Cuban families. This list was compiled by a team of researchers sent out to each block & into each building in West New York. The dependent variable, economic adjustment, was operationalized through 2 indicators: (a) a comparison of the occupations of each respondent in Cuba & in the United States by means of the weighting classification developed by the United States Census Bureau & (b) a closed question asking respondents how satisfied they felt with their work in West New York. The most striking factor in the resettlement of these Cubans has been the sharp decline in their occupational levels from Cuba to West New York, & at the same time their expression of satisfaction with their work in the United States. This expression of satisfaction is explained by the presence of a strong refugee community among Cubans living in West New York. It has provided a comparison reference group for these Cubans so that they evaluate their own occupational performance in the United States according to the performance of people in similar circumstances, fellow refugees, rather than according to the occupational levels attained by the Americans around them. Secondly, the Cuban community has provided a great deal of psychosocial satisfaction for its members cushioning the loss of occupational status. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2E.016

Rubin, G. (1981). Migration and mental health implications of recent findings. *Migration Today*, *9*, 6-12.

Refugee/Ethnic Group: General

Numerous studies have shown a significant relationship between clustering of the foreign born and low incidence of mental illness. Existing data on European ethnics, Hispanics, and Asians indicate that the formation of ethnic communities in the U.S. bolsters the identity of the migrants, lessens feelings of isolation and alienation, and enhances their sense of security. The fostering of clusters of newcomers should be the first priority in any program aiming to deal with their mental health. In addition, effective psychological care must take into account the cultural experience of the clients. Mental health professionals need to be sensitive to the world view of their clients and prepared to modify their conceptions and approaches where needed. (POPLINE/TAC)

2E.017

Silverman, M. M. (1985). Preventive intervention research: A new beginning. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 169-181). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

The goal of the NIMH Center for Prevention Research is to support research efforts which focus on the reduction and elimination of mental health problems as well as early intervention strategies. The concept of "primary prevention in mental health" reflects the focus of the NIMH. The author states that the direction of primary prevention strategies should be both reactive and promotive or proactive -- reactive strategies which focus on individuals at risk for mental disorders; proactive which focus on the development of positive mental health skills. The four identified primary prevention targets are: 1) mental illness of known etiology; 2) mental illness of unknown etiology; 3) emotional distress, maladaptation and maladjustment; and 4) promotion of personal, social/interpersonal and functional competency. Evaluation criteria for preventive intervention research grants are given. New types, targets, and settings of intervention are explored. The author cautions that the unique mental health concerns of minority populations must be remembered in the area of preventive intervention research. (TAC)

2E.018
Vinh, H. T. (1981). Indochinese mutual assistance associations. *Journal of Refugee Resettlement*, *1*, 49-52.

Refugee/Ethnic Group: Southeast-Asian

Indochinese Mutual Assistance Associations are discussed in terms of integration rather than assimilation, common aims, activities, leadership, formation, support, and problems. (TAC)

2E. Prevention, Promotion, and Outreach ...

The following references (identified by their bibliography number) also contain some information relevant to category **2E**:

1C.015, 1C.016

1D.019, 1D.026, 1D.031

1E.003, 1E.018

2A.011, 2A.027, 2A.044, 2A.075

2C.003

2D.009, 2D.025, 2D.047

2F.010, 2F.016, 2F.024, 2F.026

2G.005, 2G.010

3A.007, 3A.008, 3A.028, 3A.032

3B.007

3C.002

3D.010

The reader is advised to refer to the above references for more information regarding **Prevention, Promotion, and Outreach**.

2F. Mental Health Service Delivery ...

2F.001
Aitken, W. F. (Ed.). (1978). *A quadrilingual manual and directory, a mental health guide for Southeast Asians.* Pennsylvania: Office of Mental Health.

Refugee/Ethnic Group: Vietnamese; Cambodian; Lao; Southeast-Asian

The manual, which is written in Vietnamese, Cambodian, Laotian and English, provides a directory, by state, of facilities where Indochinese refugees can receive assistance. The manual is written in lay terms and describes symptoms of mental illness, services which are offered, procedures at CMHCs, and a brief statement on who uses these services in U.S. (NIMH)

2F.002
Avni, J. (1983). Consultation-liaison psychiatry in Israel. *Advances in Psychosomatic Medicine*, *11*, 88-108.

Refugee/Ethnic Group: Israeli; General

An historical perspective of the development of mental health services in Israel. A description of special problems of the patient population including: immigration, the holocaust, the wars and terrorism. (MEDLINE/TAC)

2F.003
Baron, R. (1978). Mental health services for ethnic minorities. *Currents*, *3*, 1-8.

Refugee/Ethnic Group: General

This article spotlights some of the people and programs that have made the effort to stay in touch with local needs and to remain sensitive to ethnic differences. From discussions with innovators across the country, several key problem areas have been identified. (1) Concern - several national organizations are engaged in an uphill struggle to win recognition, at national and local levels, of the importance of special ethnic mental health services. (2) Structure - reorganization of delivery system procedures must be undertaken; additional bilingual staff, aggressive outreach programs and sensitive intake procedures must be developed. (3) Research - awareness increased that past research efforts are not readily applicable to ethnic subcultures, and that ethnic-specific research needs to be supported and examined. (4) Training - expanded efforts are needed to provide training for current MH/MR professionals and to draw more ethnic minority people into the profession. (5) Therapy - more work must be devoted to developing new therapeutic approaches to the special mental health problems experienced in each American subculture. (TAC)

2F.004

Egawa, J., & Tashima, N. (1981). *Alternative service delivery models in Pacific/Asian American communities.* San Francisco: Pacific Asian Mental Health Research Project.

Refugee/Ethnic Group: Southeast-Asian; Pacific-Islander

Alternative agencies are defined as voluntary service organizations which provide service to underserved populations and use indigenous workers in service delivery. In actuality many have affiliated with CMHCs and other service agencies. Author states that low utilization of services within this population is due to "barriers to service" and "incompatibility" between client community norms and those of the service provider, not because they are mentally healthy. The authors conducted a study to review 45 agencies delivering mental health services to Pacific/Asian Americans (NIMH grant) in Los Angeles, San Diego, San Francisco, and Seattle. The results indicated that all provide bilingual/bicultural staff and diverse services which often include case advocacy management. Author briefly describes services provided, organizational structures, and funding patterns. Elements of culturally appropriate models, e.g., 1) decrease stigma by not labeling service as mental health service, or by "embedding" service with a more accepted program (describes model program); and 2) worker-client relationship needs personalization and advocacy assistance. The study also found community outreach programs to include increased provision of information about services into the community, satellite offices within other community based agencies, and ethnic centers. (NIMH)

2F.005

Lee, E. (1985). Inpatient psychiatric services for Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 307-328). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Many mental health programs for Southeast Asian refugees are developed for outpatient use only. This chapter discusses the importance of integrating inpatient services into the total delivery system targeted for refugees. The author offers a comprehensive description of an inpatient psychiatric program located at San Francisco General Hospital, California. Included in this description are the program's goals, setting, treatment philosophy, and clinical services. Characteristics of Southeast Asian refugee patients treated in the program are also provided. Elements that contribute to the program's success are discussed, and suggestions for future inpatient service planning are given. (TAC)

2F.006
Leong, C. A., Sasao, T., & Uomoto, J. M. (1983). Selected mental health issues for Asian American psychologists in the eighties. *Asian American Psychological Association Journal, 8*, 1-13.

Refugee/Ethnic Group: Asian-American

This article highlights issues that are presently important for Asian American psychologists to consider. Some issues have been raised concerning mental health research, training, and delivery but have been explored only superficially. Furthermore, the need for indirect services, the trend towards health psychology, and the social psychological considerations in research and training represent only a few of the issues that need to be addressed. Other topics needing attention include affirmative action, funding of research and community clinics, and resettlement of refugees. Four specific suggestions are made and discussed. ((c)APA)

2F.007
Lourie, N. V. (1982). Innovative mental health services for Indo-Chinese refugees in the United States. In R. C. Nann (Ed.), *Uprooting and surviving: Adaptation and resettlement of migrant families and children.* (pp. 35-40). Dordrecht, Holland: D. Reidel.

Refugee/Ethnic Group: Southeast-Asian

Author provides a brief description of the current status of Southeast Asian refugees and of a variety of new projects and programs which were established to serve refugees. Five states' (Massachusetts, Ohio, Colorado, California, and Washington) national mental health demonstration projects are mentioned. (POPLINE/TAC)

2F.008
Lum, R. C. (1985). A community-based mental health service to Southeast Asian refugees. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 283-306). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

The community mental health profession is currently constructing models of service delivery appropriate for the new population of Southeast Asian refugees in America. It is necessary to evaluate these new models that are being developed to serve this culturally diverse group. This chapter details the service design issues of accessibility and utilization; matching the client with the provider;

integration and linkage of services with other support systems; accountablity and community participation; staff recruitment and training; funding; and client community population characteristics. An example of a community-based mental health service (Asian Community Mental Health Services in Northern California) is discussed in regard to these design considerations, and recommendations for improvements in services are given. (TAC)

2F.009
Matsushima, N. W., & Tashima, N. (1982). *Summary - Mental health treatment modalities of Pacific/Asian American practitioners.* San Francisco: Pacific Asian Mental Health Research Project.

Refugee/Ethnic Group: Asian

Authors report on an exploratory-descriptive study to identify the range of mental health treatment modalities used with Pacific/Asian Americans. A national sample of 347 Pacific/Asian practitioners who have Pacific/Asian clients completed a survey questionnaire. Results indicated that the therapists: 1) were a heterogeneous socio-demographic group by age, sex, ethnicity, etc; 2) were from a variety of occupations: (50%) social workers, (16%) psychologists, (14%) paraprofessionals, (11%) psychiatrists, (10%) other; 3) had varied training and experience, 81% at least MA; 4) had a bilingual practice, 63%; 5) used eclectic treatment approaches, preference for cognitive/behavioral (however, not the physicians); and 6) ethnicity was associated with treatment approach. The results also indicated that treatment varied by client's ethnicity, value orientation, and presenting problem, e.g., psychodynamic for Chinese and Japanese, phenomenological for Japanese and Filipino. Therapists tended to use phenomenological modality with traditionally-oriented clients. Interpretive and structured styles were most frequently used while authoritative and confronting were least used. Further research is needed on relationship between treatment style and client values, ethnicity and background, treatment modality and therapist training, and ethnic-specific values and ethnic-community values. (NIMH)

2F.010
Muncy, S. (1985). Community Mental Health and Family Services, Inc.: A program description. *Passage: A Journal of Refugee Education, 1*, 43-45.

Refugee/Ethnic Group: Southeast-Asian

The Community Mental Health and Family Services, Inc. (CMHS) provides comprehensive, personal, social, and mental health services for Indochinese refugees at the Philippine Refugee Processing Center. This article is a general overview of the major tasks and functions of that agency. The article has been prepared so that educators and other refugee assistance workers may develop a better understanding of this service delivery system and how it meets the needs of Indochinese refugees. (AUTHOR)

2F.011

Murase, K. (1980). State and local public policy issues in delivering mental health and related services to Asian and Pacific Americans. In L. Chin (Ed.), *U.S. commission on civil rights, civil rights issues of Asian and Pacific Americans: Myths and realities.* (pp. 701-721). Washington, DC: Government Printing Office.

Refugee/Ethnic Group: Southeast-Asian

State and local public policy issues are discussed which pertain to the delivery of mental health services to Asian and Pacific Americans, including Southeast Asian refugees. (NIUCSEAS/TAC)

2F.012

Murase, K., Egawa, J., & Tashima, N. (1985). Alternative mental health services models in Asian/Pacific communities. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 229-260). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Asian; Pacific-Islander

This article reviews the Asian/Pacific Islander American communities' response to the need for mental health and related services. The basic problem found among these communities is the underutilization or nonutilization of existing services. Factors that affect service utilization are identified and discussed. Types of alternative agencies are reviewed in regard to their wide range of organizational characteristics, functions and funding sources. The major functions of the community-based agencies are identified as the delivery of culturally appropriate services, the facilitation of access to services, and client linkage to a comprehensive service network. Examples of agencies and study sites are given. (TAC)

2F.013

Nguyen, S. D. (1984). Mental health services for refugees and immigrants. *Psychiatric Journal of the University of Ottawa, 9*, 85-91.

Refugee/Ethnic Group: Southeast-Asian

Among 118 9-75 yr old Southeast Asian refugees resettled in Ontario, Canada, who had been referred for psychiatric assessment, the most common reasons for referral were bodily complaints, attempted suicide, and abnormal behaviors such as school adjustment problems and manifest delusions. Depression and anxiety were the most frequent mental health problems observed, followed by psychosis and transient adjustment reactions. Difficulties in adjustment included separation from family members, marital and family difficulties, worries about the future, and job dissatisfaction. Underutilization of mental health services was related to unfamiliarity with North American mental health concepts, the stigma of mental illness, reliance on the family, cultural explanations of mental illness, and use of traditional healing practices. Other barriers to services were lack of bilingual staff, lack of cultural sensitivity on the part of staff, and absence of culturally relevant treatment models. ((c)APA)

2F.014

Nguyen, S. D. (1985). Mental health services for refugees and immigrants in Canada. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 261-282). Washington, DC: National Instituite of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Information is presented on 118 Southeast Asian refugee patients who resettled in Canada, and who were referred to the author during the years 1978-1983. Demographic data show the distribution of the patients in regard to sex, age, education, ethnicity, marital status, social class and employment status. The presenting problems of the refugees are outlined showing somatic complaints, often stemming from anxiety and depression, as the most common reason for referral. The distribution of the patients according to diagnosis is also given, with depression and anxiety symptoms present in each person assessed. A discussion on the delivery of mental health services to refugees and immigrants follows. Included are cultural explanations of somatization, adjustment, mental health concepts, mental illness, and extended family. Lack of information and accessibility of services are highlighted. Objectives toward effective mental health services, and tables reflecting the demographics, are provided. This chapter is a reprint of REF. NUMBER 2F.013. (TAC)

2F.015

Owan, T. C. (1982). Neighborhood-based mental health: An approach to overcome inequities in mental health services to racial and ethnic minorities. In D. E. Beigel & A. J. Naparstek (Eds.), *Community support systems and mental health - practice, policy and research.* (pp. 282-300). New York: Springer Publishing Company.

Refugee/Ethnic Group: Southeast-Asian; General

Author states that ethnic groups today embrace cultural pluralism. Cites professional data which indicates that new immigrants do not, perhaps cannot, adapt to current methods of service delivery. They do not fit YAVIS patient (Young, Attractive, Verbal, Intelligent, Successful). Author cites evidence of differential treatment in therapy between whites and minority group members; underuse of mental health services; and noncompliance with federal regulations (defacto) particularly for non-English and limited English speaking persons. Neighborhood-Based Mental Health (NBMH) service delivery is endorsed. NBMH focuses on realistically sized ethnic or destiny-related geographic areas, fit the professional to the client, and have greater utilization than traditional CMHCs. Components of NBMH, i.e.: 1) alternate service delivery models, e.g., social support, socio-cultural development, community psychiatry-community mental health; 2) neighborhood-based support system; 3) research, i.e., is NBMH effective? and 4) evaluation, e.g., availability, accessibility, acceptibility, appropriateness, accountability. (NIMH)

2F.016
Owan, T. C. (Ed.). (1985). *Southeast Asian mental health: Treatment, prevention, services, training, and research.* Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

This sourcebook was developed by the National Institute of Mental Health in collaboration with the Office of Refugee Resettlement to provide technical assistance in planning and implementing appropriate services for Southeast Asians refugees. It contains chapters in five areas: treatment, prevention, services, training, and research. The contributors of the volume offer innovative ideas about the need for more basic sociocultural research, development of social support systems, mental health services more closely tailored to non-English-speaking populations, and sustained assistance for those considered most in need of mental health services. (TAC)

2F.017
Sue, S. (1977). Community mental health services to minority groups: Some optimism, some pessimism. *American Psychologist, 32,* 616-624.

Refugee/Ethnic Group: Asian-American; Hispanic; Black; Native-American; White

For many years, researchers and practitioners have found that minority-group clients who seek psychotherapeutic services receive discriminatory treatment from white therapists. Underlying this finding is the implicit assumption that the mental health delivery system should strive to provide equal and nondiscriminatory services for all clients. An analysis of the services received by minority clients in 17 community mental health facilities suggested that blacks received differential treatment and poorer outcomes than whites. However, Asian-American, Chicano, and native American clients who tended to receive treatment equal to that of white clients also had poorer outcomes as measured by premature termination rates. It is suggested that a time may well come when minority clients receive equal but unresponsive services and that primary attention should be placed upon the delivery of responsive services rather than upon the demonstration of inequities. (AUTHOR)

2F.018

Sue, S., & McKinney, H. (1975). Asian Americans in the community mental health care system. *American Journal of Orthopsychiatry*, *45*, 111-118.

Refugee/Ethnic Group: Asian-American

Based on the concern that the rates of psychopathology among Asian Americans has been underestimated and that available resources are inadequate, the authors conducted a study of patient utilization in 17 community mental health facilities in the Seattle, Washington, area during 1970-1973. Asian Americans were compared with white clients on a number of variables. The primary goal was to examine the utilization of the facilities, the severity of disorders, and services provided. Of 13,450 patients seen, only 7% of the patients were Asian Americans (i.e., Japanese, Chinese, Filipinos, other Asians) while they represented 2.38% (sic) of the area's population. Among other findings the study indicated that this population saw a greater variety of personnel and had higher [illegible] of psychoses than did white patients. (NIMH)

2F.019

Sue, S., & Morishima, J. K. (1982). *The mental health of Asian Americans: Contemporary issues in identifying and treating mental problems.* San Francisco: Jossey-Bass Inc.

Refugee/Ethnic Group: Asian-American

This book critically examines the current inadequacies of mental health services for Asian Americans and shows how to redesign such services to better meet their needs. The authors tell why Asian Americans avoid existing forms of treatment, why Caucasian therapists find it hard to establish rapport with them, and why the symptoms for the same kind of mental disorder may vary widely among diverse cultural groups. The book examines the ways in which family structure, sex-role conflict, interracial marriages, racial discrimination, and problems of self-identify affect the mental health of these people. (TAC/PUBLISHER)

2F.020

True, R. H. (1985). An Indochinese mental health service model in San Francisco. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 329-342). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Many mental health service providers are experiencing difficulty establishing linkages with the refugee community. Lack of funding and appropriately trained, bilingual professionals are important issues. Furthermore, the stigma associated with mental illness, and the more visibly pressing survival issues of food and shelter, create additional barriers to these linkages. Several groups in the United States are developing alternative ways of dealing with these barriers. In San Francisco, CA, a team of multiethnic refugees from the community's mental health system was created to coordinate outreach relationships; emergency and crisis interventions; training, consultation and educational activities; and to participate in problem-solving, information sharing and case discussions. The article concludes by reviewing team accomplishments and by presenting two case vignettes. (TAC)

2F.021

Tung, T. M. (1980). *Indochinese patients.* Washington, DC: Action for South East Asians, Inc.

Refugee/Ethnic Group: Southeast-Asian; Vietnamese

The cultural aspects of the medical and psychiatric care of Indochinese refugees are presented. Material derives from the author's experience as refugee combined with his direct clinical service and consultative experience with community agencies. The author portrays Indochinese ideas on matters of health, illness, and medicine; describes medical practices in contemporary Indochina; discusses problems of health services faced by the refugees in the States; and provides suggestions to ease the transition. The latter portion of the presentation is devoted to mental illness and psychiatric practice in Indochina. It stands to reason that the American mental health system needs to be more sensitive to this population who consider mental illness as organic disorder or manifestation of supernatural event rather than psychological turmoil, rely on family help rather than professional intervention, and favor environmental rememdies of medication rather than "talk therapy." The author underscores an approach which combines empathy, professionalism, "moral authority," and the use of an indigenous health professional as a translator. (NIMH)

2F.022

Tung, T. M. (1985). Psychiatric care for Southeast Asians: How different is different? In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 5-40). Washington, DC: U.S. Department of Health and Human Services.

Refugee/Ethnic Group: Southeast-Asian

Characteristics which differentiate the Southeast Asian population from mainstream users of mental health facilities are identified. The two most obvious differences are the lack of information about available resources, and language differences. The patient's journey through the various stages of psychiatric services - mode of entry, diagnosis, treatment - are presented. Author presents categories which require careful consideration when first interviewing a Southeast Asian client. There are differences in the way Southeast Asians arrive at a mental health facility (involuntarily), differences in acceptance of outside intervention, and differences in expectations. Areas of special consideration in diagnosis are: anxiety and depression, psychosis, sex and family, alcoholism, substance abuse, and gambling. Comments on the therapeutic relationship include the following areas: punctuality and flexibility, confidentiality, medication, psychotherapy, family and group therapy, and religion. Author concludes that there is a need to tailor mainstream services to not only be aware and receptive to Southeast Asians, but to implement changes to accomodate this latest group of refugees. (TAC)

2F.023

Westermeyer, J. (1974). Cross-cultural consultation for mental health planning. *International Journal of Social Psychiatry, 20,* 34-38.

Refugee/Ethnic Group: General

Little has been written on cross-cultural mental health planning. However, certain unique problems have been identified in the area of consultation which need to be addressed for the consultation process to be successful. The ethnicity of the consultant, the consultee, and the target population is one of these. The relationships between the three groups, and the communication patterns that develop, are also important. (TAC)

2F.024

Westermeyer, J., & Williams, C. L. (1986). Planning mental health services for refugees. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 235-245). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

The authors suggest taking a public health approach to the mental health needs of refugees. The principles of primary, secondary, and tertiary prevention are presented. In addition, the relevance of immediacy, proximity, and expectancy, the principles initially discovered during World War I, are described for refugees. Suggestions for planning, program, and staff development are made. (TAC)

2F.025
Williams, C. L. (1985). The Southeast Asian refugees and community mental health. *Journal of Community Psychology, 13*, 258-269.

Refugee/Ethnic Group: Southeast-Asian

This article provides a summary of the descriptive information currently available to community mental health workers about the Southeast Asian refugees. A brief overview of what is known about mental health and migration and refugee status is followed by a consideration of the psychological adjustment of the Southeast Asian refugees and then a description of recent mental health intervention strategies for this population. Suggestions are made for future research and service needs. (AUTHOR)

2F.026
Williams, C. L., & Westermeyer, J. (Eds). (1986). *Refugee mental health in resettlement countries*. Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

This book addresses the adjustment problems and syndromes that come to the attention of mental health professionals in resettlement countries like the United States, Canada, and several countries in Europe. The first section of the book on acculturation, psychopathology, and the refugee experience emphases that there is an experience common to all refugees and that past work with refugees can be useful in planning services for current refugee groups. The next section of the book contains chapters from authors in Thailand and Israel, as well as from professionals in the United States working with Southeast Asian, Cuban, and Soviet Jewish refugees. Special assessment and intervention techniques for refugees are described in another section and the book concludes with a chapter about planning mental health services for refugees. (TAC)

2F. Mental Health Service Delivery ...

The following references (identified by their bibliography number) also contain some information relevant to category 2F:

1A.001, 1A.007, 1A.019

1C.001, 1C.002, 1C.040

2A.005, 2A.041, 2A.046, 2A.064, 2A.073

2B.022, 2B.051

2C.001, 2C.002, 2C.003

2D.006, 2D.008, 2D.009, 2D.010, 2D.015, 2D.016, 2D.019, 2D.020, 2D.021, 2D.030,
2D.034, 2D.049, 2D.050, 2D.051

2E.006, 2E.007, 2E.013

2G.003

3A.026, 3A.045, 3A.049, 3A.050, 3A.057

3B.004

The reader is advised to refer to the above references for more information regarding Mental Health Service Delivery.

2G. Training Issues and Professional Development ...

2G.001
Aballi, A. J. (1974). Editorial: The Cuban physician. *Southern Medical Journal, 67*, 763-764.

Refugee/Ethnic Group: Cuban

A commentary of the problems of Cuban physicians adjusting to life in the U.S. (MEDLINE/TAC)

2G.002
Abisellan, G., & Fishbein, J. H. (1974). The Cuban physician in the United States. *Southern Medical Journal*, *67*, 841-846.

Refugee/Ethnic Group: Cuban

Three thousand Cuban physicians have been integrated into the American medical community. Their exodus and migration is historically unique and therefore endowed with singular psychosocial dynamics. Described are the sociopolitical motivations for their departure from Cuba and the conflicts generated by a dynamic interplay of divergent value systems and cultures. (MEDLINE/AUTHOR)

2G.003
Academy for Contemporary Problems. (1980). *Human systems: A manual and service inventory for American mental health practitioners and Indochinese social service workers (2nd ed.).* Columbus, OH: Academy for Contemporary Problems.

Refugee/Ethnic Group: Cambodian; Lao; Vietnamese; Southeast-Asian

The manual, prepared for use in Region V of the Department of Health and Human Services, features some national resources and a fairly detailed list of local services for the six-state region. "A Quadrilingual Discussion of Mental Health," prepared by the Office of Mental Health, Pennsyvania Bureau of Research and Training in English, Cambodian, Lao, and Vietnamese, is also included. (NIUCSEAS)

2G.004
Arredondo-Dowd, P. M., & Gonsalves, J. (1980). Preparing culturally effective counselors. *Personnel & Guidance Journal*, *58*, 657-661.

Refugee/Ethnic Group: General

Proposes a counselor training program with a specialization in bilingual-multicultural education. The need for such a program is explicit in (a) the growing number of new immigrants and refugees; (b) the expressed and perceived needs of counselors working with multicultural groups; and (c) the naming of counselors as "necessary" recipients of federal training funds to develop better bilingual programs. Courses proposed include issues in bilingual-multicultural education, multicultural counseling perspectives, a cultural awareness group experience, diagnosing the abilities and achievements of culturally diverse children, psychological testing of minorities, and the bilingual multicultural counseling internship. ((c)APA)

2G.005

Burkle, F. M. (1983). Coping with stress under conditions of disaster and refugee care. *Military Medicine*, *148*, 800-803.

Refugee/Ethnic Group: Vietnamese; Southeast-Asian

Discusses how physicians may prepare for and cope with large-scale disasters, such as the treatment of soldiers and civilians during a war. Physicians with little training in coping with disasters may experience depression, psychosis, and psychosomatic symptoms. The performance of triage during wartime causes additional stresses for otherwise competent physicians. When administering care in refugee camps or during wars in foreign countries, physicians must quickly realize the social, cultural, and religious differences placed on death. For the overworked physician, tension combined with physical exhaustion may overwhelm personality integration or paradoxically contribute to a myth of invulnerability. The author provides examples of how stresses can affect physicians by drawing on his experience in Vietnam and in Southeast Asian refugee camps. Recommendations for preparation for serving as a physician under disastrous conditions include the following: (1) learn survival language; (2) practice humility; (3) learn some psychiatric skills; (4) establish personal friendships; and (5) develop the ability to use the 3 most adaptive defense mechanisms of suppression, acceptance, and humor. ((c)APA)

2G.006

Cox, D. (1983). Professionally qualified refugees from Vietnam. *Australian Journal of Social Issues*, *18*, 275-281.

Refugee/Ethnic Group: Vietnamese; Vietnamese-Chinese

Findings are reported from a survey of the employment experiences of professionally qualified refugees from Vietnam (number of cases = 61 ethnic Vietnamese & 52 ethnic Chinese) who have settled in Australia since 1975. Major problems identified included slower-than-expected progress in acquiring English

& inadequate knowledge of alternative routes available for them to achieve recognition & appropriate employment. Implications for better counseling programs for refugees are discussed. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

2G.007
Cronin, C. (1976). Ten anh la gi? "What's your name?" *Imprint, 23*, 38-39.

Refugee/Ethnic Group: Vietnamese

Concerns the experiences of the author, a senior nursing student, in a special training program with Vietnamese refugees at the United States Public Health Service Hospital in Baltimore, Maryland. (NIUCSEAS)

2G.008
Ekstein, R. (1983). As I remember her: Anna Freud, 1895-1982. *Adolescent Psychiatry, 11*, 5-8.

Refugee/Ethnic Group: German

The author recalls his association with Anna Freud, which stretched from 1935 when the author was in training in the psychoanalytic institute in Berggasse until his last meeting with her at her home in London in 1982. She is described as a great teacher, a courageous refugee, a defender of psychoanalysis, and a builder of the Hampstead child therapy clinic in London. ((c)APA)

2G.009
Glover, N. M. (1981). Unique and beautiful: A student teaching experience. *Arts and Activities, 89*, 36, 54.

Refugee/Ethnic Group: Southeast-Asian

Author, a student teacher of art, describes working with Indochinese refugee students in Chicago, Illinois. (NIUCSEAS)

2G.010
Hamer, F. (1980). The Indochinese Mental Health Project. *Clinical Psychologist, 34*, 24-25.

Refugee/Ethnic Group: Southeast-Asian

Discusses the 4 objectives of the Indochinese Mental Health Project: (a) training Indochinese paraprofessionals, (b) integrating these trainees into existing mental health systems, (c) educating other mental health and social service professionals, and (d) building support systems. The interaction of age and education is seen as contributing to good psychological adjustment among Indochinese refugees. ((c)APA)

2G.011
Jacoby, R. (1984). The Americanization of psychoanalysis. *Psychology and Social Theory*, *4*, 1-14.

Refugee/Ethnic Group: European

Argues that the translation of psychoanalysis in America into a professional and scientific enterprise affected its language, spirit, breadth, and even those attracted to it; very few individuals with humanist, intellectual, or political commitments entered the discipline. It is suggested that the forces that guided the Americanization of psychoanalysis were (1) professionalism, (2) the insecurity of refugee analysts, (3) the gap between American and European culture, and (4) the emergence--as cause and effect--of the neo-Freudians. Each of these forces is discussed. Discussions of works by Fenichel, W. Reich, M. Horkeimer, and R. M. Linder are used to illustrate America's relationship with psychoanalysis. ((c)APA)

2G.012
Koschmann, N. L., Tobin, J. J., & Friedman, J. (1981). *Working with refugees: A manual for paraprofessionals. Vol. I-III.* Chicago: Travelers Aid/Immigrants Service, Refugee Resettlement Service.

Refugee/Ethnic Group: Southeast-Asian

This is a three volume set of training manuals for the development of bilingual, bicultural refugee workers who have no formal training in social services. Volume 1 is an introduction to working with refugees. Volume 2 reviews the life cycle as well as mental health and mental illness. Volume 3 is an introduction to interviewing and counseling skills. Case examples are of Cambodian, Laotian, and Vietnamese refugees. (NIMH)

2G.013
Kressel, K. (1974-75). Kurt Lewin and American psychology: The 'outsider' and intellectual leadership. *Groups: A Journal of Group Dynamics & Psychotherapy*, 6, 37-42.

Refugee/Ethnic Group: German

Suggests that the extent and nature of Lewin's influence on American psychology is partially due to the paradoxical nature of his psychological makeup. The ways his background in pre-war Germany and as a refugee scholar in the US had sensitized him to the dangers of social isolation are noted. His approach to psychology and several specific aspects of his career are discussed in terms of his trying to overcome being in a psychologically marginal position. ((c)APA)

2G.014

Lique, K. H. (Ed.). (1982). *A mutual challenge: Training and learning with the Indochinese in social work*. Boston: School of Social Work, Boston University.

Refugee/Ethnic Group: Southeast-Asian

This training manual is based on the experiences gained during two training programs conducted at Boston University's School of Social Work. It was written for the purposes of sharing experiences and providing guidance to mental health professionals who are involved in the task of training Southeast Asian paraprofessionals to provide services to Southeast Asian communities. What is presented can serve as a model for structuring innovative and relatively low cost training programs. The manual is divided into three major sections. Part I provides background information to Americans about cross-cultural work. It describes the refugee experience and the difficulties that can develop during the adaptation process. Additionally, it defines approaches to learning about culture, examines the dimensions of paraprofessionals' functions within agencies, and identifies dilemmas which they may face with clients, communities, and the American human service system. Part II explores the dimensions of the supervisory relationship and gives special attention to the adult education model. Principles are developed regarding how adults learn and how these can be used as guides to develop effective training programs. Part III presents the curricular training materials. The materials presented can be used in its complete form or be adapted for individual or group supervision. Users of the manual must possess basic knowledge of social work methods and skills. While cross-cultural examples are provided to illustrate specific teaching points, cultural differences are covered largely by bibliographic materials. However, it does not attempt to make cultural generalizations. The manual was written based on a national demonstration project funded by the Office of Refugee Resettlement at the Boston University School of Social Work. Students in the project were Indochinese refugees from all ethnic groups and educational backgrounds. (NIMH)

2G.015
Smith, M. W., & Fowkes, V. K. (1983). Unlicensed foreign medical graduates in California. Social and demographic characteristics and progress toward licensure. *Medical Care, 21*, 1168-1186.

Refugee/Ethnic Group: General

Foreign-born physicians graduated from foreign medical schools who were unlicensed in California are described by nationality, age, sex, location, visa status, employment, English fluency, and specialty. Over 1,210 unlicensed foreign medical graduates (FMGs) were located in California and 736 were interviewed, approximately 40% of the estimated 3,000 FMGs residing in the state. Most of the FMGs who passed the ECFMG and FLEX were young, had specialty training, had studied for the examination, had participated in review courses, and were unemployed. GMENAC projections for the number of FMGs entering the residency pool to the year 1990 may be far too low, because many unlicensed FMGs are already in the country. Two thirds of the FMGs studied came to the United States after immigration of FMGs was restricted in 1977. Many were refugees or were from countries in political upheaval. Policy issues raised are the role of FMGs in improving care to the underserved, medical standards, humanitarian issues related to the resettlement of refugees and immigrants, and the projected oversupply of physicians. (MEDLINE/AUTHOR)

2G.016
Wong, H. Z. (1985). Training for mental health service providers to Southeast Asian refugees: Models, strategies, and curricula. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 345-390). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Training programs for Southeast Asian refugee service providers are often haphazard and inconsistent with the needs of refugee communities. This article discusses some conceptual models that can be used to appropriately train providers for mental health refugee services, and provides a review of past and existing training programs. Several cautionary considerations are outlined including attention to diversity of refugee groups and resettlement patterns; inappropriate mental health treatment techniques; fragmentation in program planning; and participation of Southeast Asians in mental health services. Individual, group level, and system level factors in client - provider relationships and programs are discussed, and recommendations on mental health training and services to Southeast Asian refugees are given. (TAC)

2G. Training Issues and Professional Development ...

The following references (identified by their bibliography number) also contain some information relevant to category **2G**:

1A.019, 1A.030

1B.024

1C.018, 1C.032

1D.027, 1D.042, 1D.049

1E.006

2A.005, 2A.011, 2A.027, 2A.052, 2A.055

2B.022, 2B.034, 2B.067

2D.002, 2D.006, 2D.008

2E.005, 2E.006, 2E.007

2F.001, 2F.003, 2F.006, 2F.016, 2F.020, 2F.024

3A.018, 3A.037

The reader is advised to refer to the above references for more information regarding **Training Issues and Professional Development**.

SECTION 3

CONCERNS OF SELECTED SUBGROUPS OF REFUGEES

3A. Children and Adolescents ...

3A.001
Ahn, N. (1976). Pseudo-battered child syndrome (letter). *Journal of the American Medical Association, 236*, 2288.

Refugee/Ethnic Group: Vietnamese

This letter to the editor discusses "Cao Gio," a common folklore medical practice in Vietnam that has been misdiagnosed as child abuse in the United States. It consists of using a boiled egg covered with hair, a coin, or similar object to rub the skin until bruises occur. (TAC)

3A.002
Aronowitz, M. (1984). The social and emotional adjustment of immigrant children: A review of the literature. *International Migration Review, 18*, 237-257.

Refugee/Ethnic Group: General

Research on the social and emotional adjustment of immigrant/ refugee children has been limited. In this article, the author reviews existing literature, theorizes on the possible association between migration and psycho-social problems, and discusses several intervention programs created to deal with or prevent these problems. He cites studies in Switzerland, England, Canada, Sweden and the Republic of Germany which would seem to indicate the presence of increased psycho-social problems in this group of children. At the same time, he refers to instances where children of immigrant Indian and Pakistani families presented fewer problems than the surrounding English population, perhaps because of a stronger family support system. In addition, a Swedish national survey indicated that, on the whole, immigrant children showed the same incidence of problems as the rest of the country. Of particular interest are two studies which show that knowledge of the local language does not seem to be a major determinant of social and emotional adjustment, and that although school difficulties are a source of behavior disorders, family problems play an equally important role. After reviewing several types of intervention programs, the author concludes with four points: 1) the relationship between migration and mental health is complex, 2) social and emotional disorders are not necessarily more prevelant among immigrant children, but when they occur, they take the form of behavior disorders and identity conflicts rather than acute psychiatric illnesses, 3) children's problems arise from losses during migration or cultural conflicts, 4) school seems the most appropriate vehicle of intervention. (REFUGEE ABSTRACTS)

3A.003
Asnes, R., & Wisotsky, D. (1981). Cupping lesions simulating child abuse. *The Journal of Pediatrics, 99*, 267-268.

Refugee/Ethnic Group: Southeast-Asian; European

The ancient practice of "cupping," a therapeutic practice that has been seen among recent immigrant populations from Eastern Europe, consists of applying a heated cup to the skin until a bruise develops. These bruises have often led to a diagnosis of child abuse. (TAC)

3A.004

Aylesworth, L. S., Ly, K. K., & Anh, D. D. (1980). *Working with Indochinese children and their families.* Denver, CO: Indochinese Development Center, Park East Comprehensive Community Mental Health Center, Inc.

Refugee/Ethnic Group: Southeast-Asian

Authors briefly describe the Indochinese clientele and services provided by the Indochinese Development Center and offer recommendations for working with children. Due to the disparate rates at which individual family members have assimilated to American society, the Indochinese family units experience considerable stress and become liabilities, rather than sources of support, to the individuals. Mental health problems manifested by the children are war trauma, depression, anxiety reactions, behavioral problems, eating disorders, and mental deficiency. The prevalence of mental retardation among Indochinese is higher than that of the general population. However, schools are liable to commit diagnostic errors because of the failure to consider socio-cultural factors. General suggestions for working with children and their families are listed: (1) Work with problem children in the context of the family. (2) Address and maintain eye contact with the head of the family. (3) Do not use the child as an interpreter. (4) Use interpreter as both translator and cultural expert. (5) Identify oneself as one who has extensive experience in dealing with problems similar to the child's rather than as a mental health practitioner. (6) Obtain extensive background history of the family. (7) Use behavior and symptom description instead of the American diagnostic categories. (NIMH)

3A.005

Baker, N. G. (1982). Substitute care for unaccompanied refugee minors. *Child Welfare, 61*, 353-363.

Refugee/Ethnic Group: General

Discusses the unresolved complex issues affecting social agencies as they cope with the needs of unaccompanied refugee minors (URMs). Characteristics and casework concerns (including mental health problems) of URMs are described. It is argued that URMs, lacking the support of their own families, experience great stress in adjusting to life in the US and need services beyond those available to most refugees. ((c)APA)

3A.006

Benjamin, R., Van, T. T., & Benjamin, M. E. (1983). Alienation among Vietnamese students in the United States. *Free Inquiry in Creative Sociology, 11*, 32-34.

Refugee/Ethnic Group: Vietnamese

A large number of Vietnamese refugees have entered the United States in recent years; it seems probable that many experience alienation in their new surroundings. This possibility is examined through questionnaire data from 150 Vietnamese high school & college students residing in 4 regions. Findings include that: a high level of alienation is apparent, especially among males; urban versus rural origin in Vietnam does not affect alienation; alienation decreases with length of stay; &, for males, alienation is highest for those living in foster homes & lowest for those living independently. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

3A.007

Berthold, M. C. (1980). Issues in the education of Southeast Asian refugees. *School Psychology International, 1*, 31-33.

Refugee/Ethnic Group: Southeast-Asian

The January/February issue of 'School Psychology International' (Volume 1 Number 3) included an article entitled 'Vietnamese Refugee Children in the Chicago Public Schools'. A variety of questions and reactions were generated by the article. Some of these questions have been listed by the author followed by his response. (See ref. number 3A.008). (TAC/AUTHOR)

3A.008

Berthold, M. C. (1980). Vietnamese refugee children in the Chicago public schools. *School Psychology International, 1*, 3-6.

Refugee/Ethnic Group: Vietnamese

Describes the experience of the Chicago public school system in responding to the educational needs of the latest influx of Vietnamese immigrants. Two programs for learning English were instituted by the Board of Education. Advantages and disadvantages of each approach are discussed. ((c)APA)

3A.009
Brazelton, T. B. (1975). Psychological problems of Vietnamese orphans. *Pediatrics, 56*, 485.

Refugee/Ethnic Group: Vietnamese

In a letter to the editor the author highlights the fact that a statement by the American Academy of Pediatrics ignores the issue of long-term psychological risk of Vietnamese orphans, when discussing the health of these children. (NIUCSEAS)

3A.010
Carlin, J. E. (1975). Information regarding adjustment of Vietnamese children. In Children's Bureau, Office of Human Development/Office of Child Development, U.S. Department of Health, Education, and Welfare., *Tips on the care and adjustment of Vietnamese and other Asian children in the United States.* Washington, DC: Government Printing Office.

Refugee/Ethnic Group: Vietnamese; Asian

This pamphlet contains a brief listing of common sense "do's and don'ts" for lay people when dealing with Vietnamese children. (NIUCSEAS/TAC)

3A.011
Carlin, J. E. (1975). Vietnamese children. *Pediatrics, 56*, 337-338.

Refugee/Ethnic Group: Vietnamese

This letter to the editor from an American physician, who volunteered in Vietnam in 1969 and again in 1971, is a plea to other physicians to take special care with Vietnamese orphans newly arrived in the U.S. Commonly seen medical conditions are discussed, but the focus of the letter is on the need to be sensitive to the child's cultural heritage and past experiences when introducing the child to his or her new environment. (TAC)

3A.012
Carlin, J. E. (1979). The catastrophically uprooted child: Southeast Asian refugee children. In J. D. Pall, J. D. Noshpitz, R. L. Cohen, & I. N. Berlin (Eds.), *Basic handbook of child psychiatry.* New York: Basic Books.

Refugee/Ethnic Group: General; Southeast-Asian

The author reviews typical emotional problems by age groupings resulting from the experiences of war, evacuation, and acculturation. In children, age 6 months to 2 years, memories are preverbal and therefore very difficult to resolve, persisting for years in some cases. Children who are learning their language (12 - 36 months) may cease to learn, even exhibiting neurotic behavior such as becoming mute. In 2 to 9 year olds, the key to resolving problems with memories is being able to communicate them effectively. The child needs either a listener who understands his/her language or English-speaking ability. Those age 9 to 18 will have to deal with problems of adolescence coupled with cultural identity problems, often exhibiting excessive limit-testing. The author gives two case examples, a 13 year old boy and a 9 year old boy. (TAC)

3A.013

Carlin, J. E. (1986). Child and adolescent refugees: Psychiatric assessment and treatment. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 131-139). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: General

This chapter provides an overview of the special issues and concerns of child and adolescent refugees. The author describes factors that need to be considered in assessing a child or adolescent refugee (e.g., the age at leaving the country of origin, family relationships, general health issues, and premigration factors). Various treatment approaches (e.g., setting psychiatric expectations, using social agencies for problem prevention and crisis resolution, and support groups) are discussed. The author also describes the different concerns for children who are adopted, in foster homes, and with their biological families. She concludes with a discussion of self-esteem and identity. (TAC)

3A.014

Carlin, J. E., & Sokoloff, B. Z. (1985). Mental health treatment issues for Southeast Asian refugee children. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 91-112). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

This chapter focuses specifically on the Southeast Asian refugee children as a special group. Areas which are discussed are present and future treatment issues, a summary of recent research data, and suggestions regarding psychotherapy and future research. Areas discussed in which treatment issues with refugee children may cause conflict are: language conflicts, cultural differences, career choices, selection of marriage partners, religious differences, lack of understanding of western-type treatment, identity problems, differences in viewpoints over the Vietnam war, and duty to the extended family. Relevant findings of a five year follow-up study of Vietnamese refugee children are presented; information on children placed in foster homes and adopted children is included. Issues relating to the psychotherapeutic process with non-native English speakers are discussed, along with suggestions for future research with this population. (TAC)

3A.015
Carpio, B. (1981). The adolescent immigrant. *The Canadian Nurse*, *77*, 27-31.

Refugee/Ethnic Group: General

The author discusses the unique problems associated with being both an adolescent and a refugee, focusing on the increased number of subgroups influencing these individuals (new culture, peer group, old culture, family). She then examines the implications for nurses, particularly school health nurses. (TAC)

3A.016
Chang, T. S. (1975). The self-concept of children in ethnic groups: Black-American and Korean-American. *Elementary School Journal*, *76*, 52-58.

Refugee/Ethnic Group: Korean; Black

Black and KA children were administered the Piers-Harris Children's Self-Concept Scale in an attempt to study whether blacks and KAs differ in self-concept and whether grade in school and sex are associated with self-concept. Results indicated that KA children had higher scores on scales involving behavior, intellectual and school status, happiness, and satisfaction. BA were higher on physical appearance and attributes and popularity. There was a tendency for self-concept scores to decrease from grade 3 to grade 6. Girls in both ethnic groups had higher scores and lower anxiety than boys. Implications of this study are discussed. (HAAPIMH)

3A.017
Charron, D. W., & Ness, R. C. (1981). Emotional distress among Vietnamese adolescents: A statewide survey. *Journal of Refugee Resettlement*, *1*, 7-15.

Refugee/Ethnic Group: Vietnamese

Authors report that although a large proportion of refugees from Southeast Asia are 17 years old or younger there is paucity of research on this subgroup. Therefore the authors conducted a study to learn about the adjustment problems of Vietnamese adolescents. The authors sampled 64 Vietnamese adolescents (67 in population), 13 to 19 years of age enrolled in public schools in Connecticut. Demographic data, English language ability, and social attitudes were obtained through student self-reports and teacher assessments. Health and mental health symptoms were self-assessed on the Cornell Medical Index. Results indicated that students who reported high levels of emotional stress tended to be those who did not relate well to their American peers. Also, school-based "success" was associated with parental conflict. (NIMH)

3A.018

Dinh, V. P. (1976). A Vietnamese child in your classroom? *Instructor*, *85*, 86-87, 90, 92.

Refugee/Ethnic Group: Vietnamese

The author, a former teacher at the Delat Normal School in Vietnam and a graduate assistant at Southern Illinois University in 1976, gives some background material on the Vietnamese child to help in understanding these children in the American classroom. (NIUCSEAS)

3A.019

Feldman, K. (1984). Pseudo abusive burns in Asian refugees. *American Journal of Diseases of Children*, *138*, 768-769.

Refugee/Ethnic Group: Southeast-Asian

Six Southeast Asian refugee children had cigarette-like burn scars on the lower trunk and abdomen. Questioning of the families disclosed that the burns had been the result of therapeutic burning by folk medical healers for prior illnesses. Pediatric practitioners should recognize the therapeutic intent of these injuries to avoid inappropriate accusations of child abuse. They can likewise encourage families to seek less harmful alternative treatments. (TAC/AUTHOR)

3A.020

Forrest, D. V. (1971). Vietnamese maturation: The lost land of bliss. *Psychiatry*, *34*, 111-139.

Refugee/Ethnic Group: Vietnamese

Author studied Vietnamese legends and conducted interviews to develop this description of the psychological maturation of a child in Vietnam. The author's approach follows a psychoanalytic framework. (NIMH)

3A.021
Gallo, A. M., Edwards, J., & Vessey, J. (1980). Indochina moves to main street: Little refugees with big needs. *RN*, *43*, 45-48.

Refugee/Ethnic Group: Southeast-Asian

Refugee children present an array of nursing challenges. Nutrition assesment, immunizations, aiding the adjustment process, and gaining cooperation are discussed in this article. (MEDLINE/TAC)

3A.022
Gellis, S. S., & Feingold, M. (1976). Cao Gio (Pseudo-Battering in Vietnamese Children). *American Journal of Diseases of Children*, *130*, 857-858.

Refugee/Ethnic Group: Vietnamese

An illustrated description of cao gio, a practice which is often mistaken as child abuse. (NIUCSEAS/TAC)

3A.023
Golden, S. M., & Duster, M. C. (1977). Hazards of misdiagnosis due to Vietnamese folk medicine. *Clinical Pediatrics*, *16*, 949-950.

Refugee/Ethnic Group: Vietnamese

Concerns, for example, the lay practice of dermabrasion or "cao gao (i.e. gio)." (NIUCSEAS)

3A.024
Harding, R. K., & Looney, J. G. (1977). Problems of Southeast Asian children in a refugee camp. *American Journal of Psychiatry*, *134*, 407-411.

Refugee/Ethnic Group: Vietnamese; Southeast-Asian

Discusses the efforts made to meet the mental health needs of Vietnamese children and their families in a large US refugee camp. Many of the children received strong emotional support from the multigenerational Vietnamese families, and they adapted well to the new environment. However, children separated from their families demonstrated increased emotional vulnerability, and foster placement of children without families presented a serious problem. It is suggested that Americans' national commitment to these refugees may have ended when they (the refugees) left the confines of the refugee camp. ((c)APA)

3A.025

Huyck, E. E., & Fields, R. (1981). Impact of resettlement on refugee children. *International Migration Review*, *15*, 246-54.

Refugee/Ethnic Group: General; Southeast-Asian; Jewish; Cuban; Hispanic

Develops a conceptual framework for examining research and services needed by refugee children in the processes of acculturation. Focuses on Southeast Asians, Jews, and Cubans and Latin Americans. (NIUCSEAS)

3A.026

Jenkins, S. (1983). Children who are newcomers: Social service needs. *Journal of Children in Contemporary Society*, *15*, 39-47.

Refugee/Ethnic Group: General

Discusses the different sets of entitlements, service provisions, and social supports available for children who come to the US as immigrants, refugees, entrants, or undocumented aliens. Problems encountered in providing services to such children are discussed in terms of the conflict between assimilation and the preservation of ethnic identity, isolation from friends and relatives, competition with Americans for benefits and services, and problems of prejudice and racism. The need to develop programs related to specific client needs and to develop collaborative services between traditional agencies and ethnic associations are discussed. ((c)APA)

3A.027

Krener, P. G., & Sabin, C. (1985). Indochinese immigrant children: Problems in psychiatric diagnosis. *Journal of the American Academy of Child Psychiatry*, *24*, 453-458.

Refugee/Ethnic Group: Southeast-Asian

Twenty-one Indochinese refugee children and adolescents were evaluated and treated in a child psychiatry clinic. Work was done in conjunction with bilingual counselors, who were familiar with the patients' families and culture. Cross-cultural child rearing differences and the experience of recovering from severe stress confounded the application of DSM-III diagnoses. The revision of the diagnoses is described and the implications for the limitations for present diagnostic models are briefly explored. (MEDLINE/AUTHOR)

3A.028

Leavitt, M. (1976). Debriefing as primary prevention in unusual life events: Operation babylift. *Journal of Psychiatric Nursing*, *14*, 9-19.

Refugee/Ethnic Group: Vietnamese

Concerns University of San Francisco students who volunteered to give direct emergency care to Vietnamese refugee children in San Francisco, California. (NIUCSEAS)

3A.029

Levin, N. R., & Levin, D. L. (1982). A folk medical practice mimicking child abuse [letter]. *Hospital Practice*, *17*, 17.

Refugee/Ethnic Group: Southeast-Asian

This letter to the editor discusses the practice of "cao gio," a folk remedy employing the use of a coin rubbed on the skin until bruises form, which has often been misdiagnosed as child abuse. The physician reporting such cases needs to consider the legal issue of defamation when making such a diagnosis. (MEDLINE/TAC)

3A.030

Leyn, R. B. (1978). The challenge of caring for child refugees from Southeast Asia. *American Journal of Maternal Child Nursing*, *3*, 178-182.

Refugee/Ethnic Group: Cambodian; Lao

A pediatric RN provided primary health care at a neighborhood health center for 4 families (3 Cambodian, 1 Laotian). She cites language barriers, differences in diet, unfamiliar treatment regimes and cultural patterns of childrearing as some of the major problems of acculturation and successful health care. To overcome language barriers, human figure drawings, pantomimes and in-home demonstrations were used. Charts, color coded measuring spoons and careful monitoring methods were used to improve compliance with home medication. Misunderstandings arose due to behaviors encouraged in children by parents which differed from US culture; i.e. physical interaction with children and social isolation from peers. (MEDLINE/TAC)

3A.031
Looney, J. G. (1979). Adolescents as refugees. *Adolescent Psychiatry, 7*, 199-208.

Refugee/Ethnic Group: Vietnamese

Describes the author's involvement with adolescent Vietnamese refugees and characterizes their responses to the stress of forced immigration to the U. S. Reasons for the finding that most of these adolescents appeared to be functioning well, both physically and psychologically, are examined in terms of peer-group solidarity and the refugees' visions of an exciting life in a new country. ((c)APA)

3A.032
Looney, J. G., Rahe, R., Harding, R. K., Ward, H. W., & Liu, W. T. (1979). Consulting to children in crisis. *Child Psychiatry & Human Development, 10*, 5-14.

Refugee/Ethnic Group: Vietnamese

Describes a consultation experience in which a team of mental health professionals attempted to meet the emotional needs of Vietnamese children and adolescents in refugee camps in the US. Differences between Vietnamese and American teenagers were observed, particularly in the Vietnamese youths' strong sense of family loyalty. Recommendations are given for primary, secondary, and tertiary prevention. The consultants' basic function was that of translating knowledge of the familial and extrafamilial factors that influence growth into recommendations that had significant common sense validity for those individuals who had managerial responsibility, but who had no previous experience meeting the special needs of children. ((c)APA)

3A.033
McCarthy, J. E. (1979). Refugee children from Southeast Asia. *Migration News, 28*, 3-6.

Refugee/Ethnic Group: Southeast-Asian

Review of the Indochinese refugee unaccompanied minor program of the Migration and Refugee Service of the United States Catholic Conference (USCC). Author reviews the efforts made by his organization, by the U.S. government and by other national voluntary agencies to alleviate the plight of unaccompanied minors. Major problems for these minors are the unplanned and disorganized nature of refugee movements and the need to adjust to new social patterns and family life-styles. Author emphasizes the need for counseling and guidance. (NIUCSEAS)

3A.034
McCrohan, K. F., & Wetterer, J. (1977). Operation babylift. *American Psychologist, 32*, 671-674.

Refugee/Ethnic Group: Vietnamese

Concerns Vietnamese refugee orphans. (Note: This letter is a response to ref. number 3A.028). (NIUCSEAS)

3A.035
Nann, R. C. (1982). *Uprooting and surviving: Adaptation and resettlement of migrant families and children.* Dordrecht, Holland: D. Reidel.

Refugee/Ethnic Group: General; Southeast-Asian

Empirical observations about the phenomenon of migration and the adaptive patterns of migrants as they settle into a new environment. Chapters are diverse and include reports from a variety of regions around the world. Topics include on-going experiences such as: the adaptation of Southeast Asian refugees in the U.S.; the experience of immigrant populations in North America, Europe, and Asia; the changing mobility and life styles of West Africans; the status of foreign workers in Europe; and the special problems of children and youth. Common theme is the effect of change on individuals, families, and communities involved in the process of migration and resettlement. (POPLINE/TAC)

3A.036
Newman, C. J. (1976). Children of disaster: Clinical observations at Buffalo Creek. *American Journal of Psychiatry, 133*, 306-12.

Refugee/Ethnic Group: General

Most of the 224 children who were survivor-plaintiffs of the Buffalo Creek disaster were emotionally impaired by their experiences. The major factors contributing to this impairment were the child's developmental level at the time of the flood, his perceptions of the reactions of his family, and his direct exposures to the disaster. The author focuses on children under 12, describing their responses to fantasy-eliciting techniques and their observed behavior after the flood compared with developmental norms for their age and reports of their previous behavior. These children share a modified sense of reality, increased vulnerability to future stresses, altered senses of the power of the self, and early awareness of fragmentation and death. These factors could lead to "after-trauma" in later life if they cannot make the necessary adaptation and/or do not receive special help to deal with the traumas. The effects of the disaster on children can be attributed to three major factors: 1) their developmental level at the time of the disaster, 2) their perceptions of the family's reactions to the disaster, and 3) their direct exposures to the disaster. This paper illustrates each factor and examines their numerous interactions. (TAC/AUTHOR)

3A.037
Nidorf, J. F. (1985). Mental health and refugee youths: A model for diagnostic training. In T. C. Owan (Ed.), *Southeast Asian mental health: Treatment, prevention, services, training, and research.* (pp. 391-430). Washington, DC: National Institute of Mental Health.

Refugee/Ethnic Group: Southeast-Asian

Mental health problems among refugees span all age groups yet their manifestations vary with the age and stage of development of the individual. It is essential to view the refugee's psychological experience within the "context" of the refugee situation, and to incorporate a "contextualized" theory of development that is based on the influence of cultural and environmental variables into refugee mental health training. This article identifies premigration, migration and postmigration contextual factors that specifically influence refugee adolescents, and provides ten diagnostic questions that can generate adaptation and functioning information. Discussions and case illustrations are given. (TAC)

3A.038
Pickwell, S. M. (1981). School health screening of Indochinese refugee children. *The Journal of School Health*, 102-105.

Refugee/Ethnic Group: Vietnamese; Hmong; Lao; Cambodian

Thousands of Indochinese refugees enter the U.S. every month without proper health screening. The school nurse is often the first health care provider to see the family and therefore must be aware of common cultural, medical, and referral issues. Problems encountered include incomplete immunization, lice, scabies, positive skin tests, dental decay, depression and aggression. The author discusses cultural variations in Vietnamese, Hmong, Laotian, and Cambodian populations, as well as the difference between immigrant and refugee status. Guidelines to help school screening and refugee resettlement are provided. (TAC)

3A.039
Primosch, R., & Young, S. (1980). Pseudo battering of Vietnamese children (cao gio). *Journal of the American Dental Association, 101*, 47-48.

Refugee/Ethnic Group: Vietnamese

The case of a Vietnamese child who was subjected to the folk medicine practice of cao gio by his father after a routine dental extraction is described. The practice and the clinical appearance are discussed to distinguish it from child abuse. (TAC/AUTHOR)

3A.040
Redick, L. T., & Wood, B. (1982). Cross-cultural problems for Southeast Asian refugee minors. *Child Welfare, 61*, 365-373.

Refugee/Ethnic Group: Vietnamese; Chinese; Southeast-Asian

Presents a composite case example of a 17-yr-old Chinese-Vietnamese male to illustrate cultural misunderstandings likely to be experienced by refugee minors and their American foster families. Resolution of misunderstandings involved the S's overt adoption of American customs, acceptance of the S's cultural customs by his American family, compromise by persons in both cultures, and a peaceful coexistence of the 2 cultures. ((c)APA)

3A.041
Rudnik, J. P., & Molstad, L. P. (1984). Implications of cross cultural foster care: Stages of adjustment. *Journal of Foster Care, 1*, 3-5.

Refugee/Ethnic Group: Southeast-Asian

The adjustment dynamics related to Indochinese unaccompanied minors entering foster care within the United States and the corresponding adjustment stages of foster families is the major thrust of this article. The reported stages are based upon data gathered through the Unaccompanied Minors Program operated by Lutheran Social Service of Minnesota. (TAC/AUTHOR)

3A.042
Sandler, A., & Haynes, V. (1978). Nonaccidental trauma and medical folk belief: A case of cupping. *Pediatrics, 61*, 921-922.

Refugee/Ethnic Group: Southeast-Asian

The ancient remedy of "cupping," is prevalent among some cultural groups in the United States. It is a practice which causes bruises, which have frequently been mistaken as the results of child abuse. (TAC)

3A.043
Sokoloff, B. (1975). Vietnamese refugee children (Letter). *Western Journal of Medicine, 122*, 514-515.

Refugee/Ethnic Group: Vietnamese

This letter to the editor from a California physician addresses the medical and psychological problems among South Vietnamese orphans and suggests appropriate initial medical interventions. (NIUCSEAS/TAC)

3A.044
Sokoloff, B. Z., Carlin, J. E., & Pham, H. (1984). Five-year follow-up of Vietnamese refugee children in the United States. *Clinical Pediatrics, 23*, 565-570.

Refugee/Ethnic Group: Vietnamese

Investigated the physical, mental, and psychosocial health of 643 Vietnamese refugee children, most of whom were less than 1 yr old when they left Vietnam. Questionnaires were administered to adoptive families, foster families, and Vietnamese children living in the US with their family units. Otitis media, respiratory ailments, and varicella constituted a large number of their initial medical problems. Severe nightmares and temper tantrums occurred frequently during the 1st yr. Problems with excessive fears and jealousy were also noted. It was found that Ss' health and emotional problems improved markedly after the 1st yr. Sociocultural aspects of adjustment, such as peer and school adjustment and parental and community reactions, are described. It is noted that social and school problems were minimal for most Ss, especially those who were adopted, and that advance preparation and guidance given by the involved agencies appeared to be of significance in achieving these results. ((c)APA)

3A.045
Szapocznik, J., & Cohen, R. E. (1986). Mental health care for rapidly changing environments: Emergency relief to unaccompanied youths of the 1980 Cuban refugee wave. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 141-156). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Cuban

The authors describe the program developed to meet the mental health needs of the children and adolescents in the Cuban refugee wave of 1980. Experiences at four U.S. refugee camps (Eaglin Air Force Base, FL; Fort Indiantown Gap, PA; Fort McCoy, WI; and Fort Chaffee, AK) are discussed. A description is provided of the population and the Cuban Adolescent Management Program (CAMP). Staffing issues, the program structure, the Daily Living Program, crisis/psychological/psychiatric services, and resettlement services are presented. (TAC)

3A.046
Terr, L. C. (1984). Time and trauma. *Psychoanalytic Study of the Child, 39*, 633-665.

Refugee/Ethnic Group: General

This study is a four year follow-up of the psychic trauma experienced by twenty-six children kidnapped from their Chowchilla, California, schoolbus in July of 1976. An age and sex matched control sample of 25 "normal" children was also studied. It was found that children are not any more flexible than adults following a pure psychic trauma. Brief psychiatric intervention from 5 to 13 months after the trauma did little to decrease symptoms. (TAC)

3A.047
Thuy, T. N., **Tam, H. D., Craig, W. J., & Zimmerman, G.** (1983). Food habits and preferences of Vietnamese children. *Journal of School Health, 53*, 144-147.

Refugee/Ethnic Group: Vietnamese

In this study, information on food preferences and intake frequencies of 70 Vietnamese children was gathered by means of a questionnaire. The purpose was to compare the dietary habits of children who had been in the U.S. for more than one year with those of children arriving within the past year (1981). The results showed that children less than six years old who came to California more than one year ago consumed green leafy vegetables less frequently (p less than 0.01) and vitamin supplements more frequently (p less than 0.01) than those who came here recently. In the older groups (greater than 6 yrs), those who have been resident in the U.S. for more than one year consumed peanut butter and sweets (ice cream, pies, milkshakes) more frequently than those who had just arrived (p less than 0.001 and p less than 0.05, respectively). Older children (age greater than 6 yrs) who had been in the U.S. longer preferred American foods more than those who had just come (p less than 0.01). The majority of all children ate fruits as snacks. The consumption of rice, eggs, cheese, milk, meats and fruit juice was not significantly different in any of the four groups. This study also revealed a great need of nutrition education for the Vietnamese refugee mothers. Recommendations for planning nutrition education for this population are provided. (MEDLINE/AUTHOR)

3A.048
Tobin, J. J., & Friedman, J. (1984). Intercultural and developmental stresses confronting Southeast Asian refugee adolescents. *Journal of Operational Psychiatry, 15*, 39-45.

Refugee/Ethnic Group: Vietnamese; Lao; Cambodian; Vietnamese-Chinese; Southeast-Asian

Explores how critical issues of adolescence (separation, identity, and sexuality) interact with critical issues of being a refugee (loss and grief, survivor guilt, trauma reactions, and cultural discontinuity) among adolescent refugees from Southeast Asia, based on the experience of the authors as director of training and mental health specialist in a large refugee resettlement program in the US. Refugees come from Vietnam, Laos, and Cambodia; between one-third and one-half are ethnically Chinese. In the Southeast Asian view of the life cycle, age serves as an important social and individual organizing principle. Ss are conscious of being outside the normal ages in marrying, finishing education, getting a job, and having children. Case illustrations of how Oedipal issues have been complicated by trauma reactions, survivor stress, and cultural discontinuity are given. It is suggested that cohorts of refugee children will be at risk until they reach stability in adulthood. ((c)APA)

3A.049
Touliatos, J., & Lindholm, B. W. (1980). Behavioral disturbance in children of native-born and immigrant parents. *Journal of Community Psychology, 8*, 28-33.

Refugee/Ethnic Group: Southeast-Asian; Chinese; Japanese

To examine the mental health status of children whose parents were foreign-born and to determine if these youngsters have a special need for mental health services, this study compared the incidence of behavioral distubance in 2991 children who were native-born and white with 97 children of immigrant parents. General information and ratings on a behavior problem checklist were obtained from teachers. Based upon an analysis of variance procedure, the results revealed that subjects of Chinese, Japanese, or Southeast Asian descent exhibited significantly fewer disorders, such as conduct problems and inadequacy-immaturity, than children of native-born parents. (TAC/AUTHOR)

3A.050
von Bethlenfalvy, P. (1983). Migrants in an irregular situation in the Federal Republic of Germany. The psycho-social situation of unaccompanied minors from areas of armed conflict in West Berlin. *International Migration, 21*, 238-259.

Refugee/Ethnic Group: General; Lebanese

This study examined the experience of minor migrants from Lebanon to West Germany. The assistance provided to these immigrants by the "Al-Muntada-Centre" is discussed. Established as a "self-help" concept, the center has developed appropriate methodology for counseling and assisting refugees. Specific recommendations are offered to facilitate working with the immigrant population on both national and international levels. (POPLINE/TAC)

3A.051
Walter, I., & Cox, C. (1979). Resettlement in the United States of unattached and unaccompanied Indochinese refugee minors (1975-1978) by Lutheran Immigration and Refugee Service. *International Migration (Switzerland), 17*, 139-161.

Refugee/Ethnic Group: Southeast-Asian

Review of the resettlement of 156 Indochinese unaccompanied minors in the U.S. by the Lutheran Immigration and Refugee Service (LIRS) from April 1975 through December 1978. The review focuses on the characteristics and needs of these minors and on ways to strengthen the program to their benefit. Alternative arrangements include: foster home placement, placement in small group homes, and supervised independent living arrangements for older youth. In general, the authors believe that the LIRS program has had positive results. Includes an appendix on recommendations regarding unaccompanied minors. (NIUCSEAS)

3A.052
Westermeyer, J. (1977). Cross-racial foster home placement among Native American psychiatric patients. *Journal of the National Medical Association, 69*, 231-236.

Refugee/Ethnic Group: General

This article is a study of 17 Indian psychiatric patients who were raised in foster homes. The variables studied include: sociodemographic characteristics, clinical problems, age at placement, number of placements, and total duration of years spent in the foster home. The social and psychological morbidity demonstrated within this sample group presents a strong argument for sincere attempts to be made to keep Indian children with their relatives, if at all possible, or placed in an Indian foster home. (TAC)

3A.053
Williams, C. L., & Westermeyer, J. (1983). Psychiatric problems among adolescent Southeast Asian refugees: A descriptive study. *Journal of Nervous & Mental Disease, 171*, 79-85.

Refugee/Ethnic Group: Southeast-Asian

When first faced with evaluating and/or treating a Southeast Asian adolescent psychiatric patient, the American therapist may be overwhelmed by the vast cultural differences. The authors review the cases of 28 12-20 yr olds encountered in a psychiatric setting in order to provide a description of their presenting complaints and problems. Diagnostic categories and demographic characteristics are described, as well as current areas of need for this population. ((c)APA)

3A.054
Yeatman, G. W., & Viet, V. D. (1980). Cao Gio (Coin Rubbing): Vietnamese attitudes toward health care. *Journal of the American Medical Association, 244*, 2748-2749.

Refugee/Ethnic Group: Vietnamese

The authors are of the opinion that "cao gio" is "clearly not a purposely abusive practice" and "should not be considered as harmful." (NIUCSEAS)

3A.055
Yeatman, G. W., Shaw, C., Barlow, M. J., & Bartlett, G. (1976). Pseudobattering in Vietnamese children. *Pediatrics, 58*, 616-618.

Refugee/Ethnic Group: Vietnamese

Brief comment on the existence of the lay medical practice of "cao gio" among Vietnamese in the United States. The practice involves firm downward strokes with a coin until lesion are often produced. The coin-rubbing is used for alleviating such symptoms as fever, chills, and headaches. Authors note that American physicians should be aware of this practice "in order to eliminate undue concern about child abuse in Vietnamese children". (NIUCSEAS)

3A.056
Zigler, E. (1976). A developmental psychologist's view of operation babylift. *American Psychologist, 31*, 329-340.

Refugee/Ethnic Group: Vietnamese

Critique of the April 1975 "babylift" of 2000 Vietnamese children to the U.S. for adoption by Americans. Author notes errors in the planning, procedures, and logistics of the operation and discusses the following more general criticisms: (1) the program was not humanitarian, but rather was an attempt to assuage American guilt; (2) the airlift was tokenistic; (3) the effort was "imbued with American chauvinism, racism, and xenophobia;" (4) the airlift was not in the best interests of the children, many of whom were not even orphans; and (5) the efforts toward the Vietnamese children were "desperately needed by a much larger number of American children." (NIUCSEAS)

3A.057

Zipstein, D., Hanegbi, R., & Taus, R. (1986). An Israeli experience with Falasha refugees. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries*. (pp. 97-112). Washington, DC: Hemisphere Publishing Corporation.

Refugee/Ethnic Group: Falasha

This chapter describes the work of Israeli mental health professionals with a small group of racially and culturally different refugees, the Falasha from Ethiopia. The authors developed a mental health program to meet the needs of three adolescent Falasha refugees who were encountering difficulties in a nursing school. The chapter puts the work in historical context with a description of Youth Aliyah, a voluntary child-care organization. Information about the cultural background of the Falasha is also presented. (TAC)

3A. Children and Adolescents ...

The following references (identified by their bibliography number) also contain some information relevant to category **3A**:

1A.003, 1A.018, 1A.026, 1A.028, 1A.053

1B.017, 1B.019

1C.010, 1C.011, 1C.018, 1C.075

1D.004, 1D.016, 1D.021, 1D.046, 1D.047, 1D.052

1E.013

2A.055, 2A.056, 2A.069

2B.001, 2B.003, 2B.004, 2B.006, 2B.009, 2B.012, 2B.017, 2B.018, 2B.025, 2B.026, 2B.038, 2B.047, 2B.056, 2B.068

2D.005, 2D.012

2E.002, 2E.004, 2E.011

2F.026

3D.002

3E.006, 3E.009, 3E.011, 3E.012

4.002, 4.003, 4.004, 4.011

The reader is advised to refer to the above references for more information regarding **Children and Adolescents**.

3B.001
Alexandraki, C. (1981). Services rendered by ICM to migrant and refugee women. *International Migration, 19*, 225-240.

Refugee/Ethnic Group: General

The Intergovernmental Committee for Migration has two complementary functions: to make arrangements for the transport of migrants and refugees for whom existing facilities are inadequate and who could not otherwise be moved. and to remove obstacles that might impede movements and perform a number of essential services to ensure the orderly departure of the migrants and their safe arrival and settlement in the country of reception. This report focuses on the main services ICM carries out on behalf of female national migrants and refugees emigrating under its auspices. There is one section on refugee women. (POPLINE/TAC)

3B.002
Costello, B. (1980). Women refugees. *Migration Today, 8*, 34-35.

Refugee/Ethnic Group: African; Asian; Lebanese; Swazi; Tanzanian

A brief article describing some demographic information about several refugee groups including Vietnamese and Cambodian. The article also highlights some problems specific to women refugees. (POPLINE/TAC)

3B.003
Crandall, J. A., Day, C., & Reny, E. (1982). Existing programs for orientation of women refugees and migrants. *Migration Today, 10*, 33-40.

Refugee/Ethnic Group: General

This article outlines several interesting orientation programs which have been designed to meet the needs of refugees and immigrant women here in the U.S. Brief mention is made of some programs being carried out in the refugee camps overseas. In general, women's orientation programs share many characteristics. The authors list several: 1) intended for women who are not included or able to benefit from other orientation efforts, 2) goals are specifically adapted to women and their lifestyle needs, 3) are usually taught by someone who speaks the refugee's own language, and 4) usually provide childcare and/or transportation assistance. The programs may be held in a wide variety of settings and may vary considerably in structure or format. The authors include updated information on programs surveyed in 1980. (POPLINE/TAC)

3B.004
Davison, L. (1981). Women refugees: Special needs and programs. *Journal of Refugee Resettlement*, *1*, 16-26.

Refugee/Ethnic Group: Southeast-Asian

Summarizes findings of a study undertaken to: (1) identify major problems facing Indochinese refugee women in the U.S.; (2) review programs available to them, including special women's projects; and (3) suggest changes in current programs which would respond more fully to women's needs. (NIUCSEAS)

3B.005
Hirayama, K. K. (1982). Evaluating effects of the employment of Vietnamese refugee wives on their family roles and mental health. *California Sociologist: A Journal of Sociology and Social Work*, *5*, 96-110.

Refugee/Ethnic Group: Vietnamese

In this study of 73 employed and unemployed Vietnamese refugee wives in the United States, mental health problems were found to be related to the husband's low occupational status. Husbands participated in childcare at the same rate whether wives worked or not, but housework remained a primarily feminine occupation. (SABRW)

3B.006
Hollingsworth, A. O., Brown, L. P., & Brooten, D. (1980). Indochina moves to main street. The refugees and childbearing: What to expect. *RN*, *43*, 45-48.

Refugee/Ethnic Group: Vietnamese; Cambodian; Lao

This article describes cultural practices and myths of childbearing of Vietnamese, Cambodian and Lao families. Perinatal nursing techniques that are culturally acceptable are outlined. (MEDLINE/TAC)

3B.007
Kelly, G. P. (1978). Schooling, gender, and the reshaping of occupational and social expectation: The case of Vietnamese immigrants to the United States. *International Journal of Women's Studies (Canada)*, *1*, 323-335.

Refugee/Ethnic Group: Vietnamese

In American refugee camps in 1975, Vietnamese women were given virtually no role models for assimilation into American society; men were prepared to work at lower-class occupations and to assume total power in the household, thus receiving power in exchange for loss of wealth and social status in their cultural transition. (NIUCSEAS)

3B.008
Palmer, I. (1981). Advancement preparation and settlement needs of South-East Asian refugee women. *International Migration, 19*, 94-101.

Refugee/Ethnic Group: Southeast-Asian

This paper discusses the background and family composition of Southeast Asian refugees, noting the differences between those from an urban area and those from a rural area. Specific problems and needs of women refugees are examined both in the refugee camp setting and in the country of resettlement. These areas of special need include: pregnancy and health, nutrition, skill training, language training, social isolation, victimization, and adaptation to the role of women in a new culture. Suggestions are made to facilitate the resettlement and integration processes. (POPLINE/TAC)

3B.009
Simon, R. J. (1986). Refugee women and their daughters: A comparison of Soviet, Vietnamese, and native-born American families. In C. L. Williams & J. Westermeyer (Eds.), *Refugee mental health in resettlement countries.* (pp. 141-156). Washington, DC: Hemisphere Publishing Corportation.

Refugee/Ethnic Group: Vietnamese; Soviet; Jewish

This chapter provides a comparison of two refugee groups (Vietnamese and Soviet Jew) and a general American sample of women and their daughters. The author first provides a description of the backgrounds of her subjects and then profiles the Soviet, Vietnamese, and American mothers and daughters. The study examines various sources of potential conflicts within these families (e.g., educational and occupational goals, choice of spouse, and number of children). (TAC)

3B.010
Sundhagul, M. (1981). Situation and role of refugee women: Experiences and perspectives from Thailand. *International Migration, 19*, 102-107.

Refugee/Ethnic Group: Asian; Cambodian; Thai

The focus of this article is the special set of circumstances and needs presented by women refugees in two Southeast Asian refugee camps. Recommendations are made that could be implemented on both national and international levels to address the needs of women refugees. (POPLINE/TAC)

3B.011

Walter, I. (1981). One year after arrival: The adjustment of Indochinese women in the United States (1979-1980). *International Migration, 19*, 129-152.

Refugee/Ethnic Group: Southeast-Asian

This paper presents an in-depth look at 347 Southeast Asian refugee women who arrived in the United States in the month of September 1979 under the sponsorship of Lutheran Immigration and Refugee Service (LIRS). It reviews their situation one year after arrival as seen through their own eyes and through the eyes of Americans in the community who accepted them as their new neighbors. It considers their resettlement from the family, social, emotional, English language and economic standpoints. And it looks at them with respect to differences in their ethnicity, age groups, and geographical locations: i.e., western, central and eastern U. S. (IBRL/TAC EDITED)

The following references (identified by their bibliography number) also contain some information relevant to category **3B**:

1B.043

1D.021, 1D.038

1E.007, 1E.036, 1E.040, 1E.041

2A.015, 2A.021, 2A.076

2E.002

3D.003, 3D.009

The reader is advised to refer to the above references for more information regarding **Women**.

3C. Elderly ...

3C.001
Peck, A. (1983). Psychotherapy of the elderly: Case #6. *Journal of Geriatric Psychiatry, 16*, 73-77.

Refugee/Ethnic Group: European

Describes the 20-yr treatment of a 97-yr-old woman who had been a resident of a home for older persons for 32 yrs. The S's history included an unusual upbringing, the experience of being a refugee from the Nazis, and the trauma of her husband's suicide. The S was initially referred for anxiety following after cholecystectomy. 10-15 min biweekly sessions with the author and a volunteer provided support and helped her adapt to crises that included an above-the-knee amputation, diabetic coma, and loss of friends and staff. ((c)APA)

3C.002
Rumbaut, R. G. (1984). *Migration, adaptation and age: A study of Hmong, Khmer, Lao, Vietnamese and Chinese-Vietnamese refugee families.* San Diego: Society for the Study of Social Problems.

Refugee/Ethnic Group: Hmong; Cambodian; Lao; Vietnamese; Vietnamese-Chinese

Findings from a cross-cultural panel study of the migration & integration of Southeast Asian refugee groups in San Diego County, Calif, where an estimated 40,000 Indochinese refugees have resettled since 1975, are reported. Approximately 50% of this population arrived in the United States in or after 1980, following prolonged stays in refugee camps overseas. Their arrival coincided with a period of severe economic restriction, exacerbating the problems of absorption of this migrant population. Based on comprehensive interviews with equal numbers of adult men & women in a stratified random sample of Hmong, Khmer, Lao, Vietnamese, & Chinese-Vietnamese refugee families, analyzed are the roles of age & social support as adaptive resources in the resettlement process of older respondents under conditions of severe stress, poverty, & estrangement. A multiple regression model is used to analyze the effect of radical life change on the health & well-being of refugee respondents, as mediated by a set of adaptational resources & coping strategies. The data are drawn from the ongoing Indochinese Health & Adaptation Research Project at the University of California, San Diego, supported by Grant #R01-HD15699 from the National Institute of Child Health & Human Development. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

3C.003
Simos, B. G., & Kohls, M. (1975). Migration, relocation, and intergenerational relations: Jews of Quito, Ecuador. *Gerontologist, 15*, 206-211.

3C. Elderly ...

Refugee/Ethnic Group: Jewish; South-American

Long-standing personality problems of parents, resulting in family discord, were reported as the major intergenerational stress in the Jewish refugee community of Quito, Ecuador, South America. The study of 30 20-60 yr old Jewish adults reporting on 35 60-88 yr old parents was carried out through taped interviews conducted in English, Yiddish, and German, with the aid of a semi-structured questionnaire. It is posited that in the current highly mobile world it is important to delineate subcultural group variations for adequate planning of services for the elderly, as life-styles of country of origin persevere despite geographic relocation of people. It is concluded that the losses of aging can be mitigated by adequate personal and community resources, family respect and closeness, and a past history of successful coping, the latter dependent on a group's access to educational and economic opportunities in the larger society. ((c)APA)

The following references (identified by their bibliography number) also contain some information relevant to category 3C:

1A.018

1D.057

2A.011

2E.002

2F.026

The reader is advised to refer to the above references for more information regarding Elderly.

3D. Family and Kinship ...

3D.001

Adams, B. N. (1977). Ugandan Asians in exile: Household and kinship in the resettlement crisis. *Journal of Comparative Family Studies, 8*, 167-178.

Refugee/Ethnic Group: African; Asian; Ugandan

Interviews were conducted with 1,250 ex-Ugandan Asian household heads in India, Canada, and Britain, who migrated to those three countries as a result of Amin's 1972 edict of expulsion. In Uganda, 30% of these households had been joint, and more than 33% were complex in some way. The initial effect of the transition to the West seems to have been household fragmentation. Some joint families became nuclear, and some nuclear families became subnuclear. Yet most of the refugees see these conditions as temporary, and are working to reunite broken units. If all the proposed changes in household composition were to take place, 28% of the British households, 18% of those in India, and 61% of those in Canada would change--almost all of the latter growing. Patterns of aid were very much a function of the presence or absence of kin in the receiving society. Help, when it occurred, tended to follow patrilineal lines, with helpers being brothers, and, to a lesser extent, parents & children. Results manifest elements of jointness and patrilinealism on the one hand, and fragmentation and independence on the other. Joint family principles are still very much alive, and in India, these are being reinforced, while in Canada and Britain the ex-Ugandan Asians' status as an ethnic-racial minority should have a limiting influence on the nuclearizing and individualizing effects of urban residence in these western countries. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

3D.002

Banchevska, R. (1981). Uprooting and settling: The transplanted family. In L. Eitinger & D. Schwarz (Eds.), *Strangers in the world.* (pp. 107-132). Bern, Switzerland: Hans Huber Publishers.

Refugee/Ethnic Group: General

The role of the absorption and integration of immigrants in the settlement and development of Australia is examined. The effect of the multi-cultural climate on older settlers and new arrivals is explored. Mention is made of the difficulties encountered by immigrants. A brief section on the adaptation of refugees is included. (POPLINE/TAC)

3D.003

Bounlieng, P. (1979). Aspects of Lao family and social life. In J. K. Whitmore (Ed.), *An introduction to Indochinese history, culture, language and life.* (pp. 85-92). Ann Arbor, MI: Center for South and Southeast Asian Studies, The University of Michigan.

Refugee/Ethnic Group: Lao

This chapter covers the roles of men and women, family obligations, and rites in the home which are of importance to the Lao family. The role of religions and the growing season in terms of social life is discussed. Traditional values and life styles are presented. (TAC)

3D.004
Dunnigan, T. (1982). Segmentary kinship in an urban society: The Hmong of St. Paul-Minneapolis. *Anthropological Quarterly, 55*, 126-134.

Refugee/Ethnic Group: Hmong

Laotian Hmong refugees living in the St. Paul-Minneapolis area of Minnesota have a segmentary social system based on agnatic descent. Interview (number of cases not specified) & participant observation data show that the nuclear family is embedded in the corporate sublineage, which has important reciprocal agreements with clan & affinal relatives. The various sublineages also belong to pyramidal economic & political networks that complement kinship. These networks are linked to a national leadership that works through local mutual assistance associations. Because of their experience in Laos, the Hmong are trying to retain these segmentary structures as a way of coping with resettlement in the United States. (COPYRIGHT SOCIOLOGICAL ABSTRACTS, INC.)

3D.005
Haines, D., Rutherford, D., & Thomas, P. (1981). Family and community among Vietnamese refugees. *International Migration Review, 15*, 310-319.

Refugee/Ethnic Group: Vietnamese

Analysis of the maintenance, extent, and structure of family and community ties among Vietnamese refugees in the U.S. The research included a series of field efforts in Northern Virginia in 1979-80. Authors emphasize the continuing and pervasive importance of both family and community. The family, in particular, is seen to extend well beyond the boundaries of the household and to be capable of furnishing significant amounts of emotional and practical support. (NIUCSEAS)

3D.006

Hanh, P. T. (1979). The family in Vietnam and its social life. In J. K. Whitmore (Ed.), *An introduction to Indochinese history, culture, language and life -- for persons involved with the Indochinese Refugee Education and Resettlement Project in the State of Michigan.* (pp. 77-84). Ann Arbor, MI: Center for South and Southeast Asian Studies, The University of Michigan.

Refugee/Ethnic Group: Vietnamese

Overview of traditional Vietnamese kinship, its changes due to urbanization and war, and its future importance among Vietnamese refugees in the United States. Author stresses the centrality of the family in social life, and the patrilineal nature of Vietnamese kinship. While the extended nature of traditional households has been threatened by the forces of modernization and foreign influence, ties between kin remain strong and the family remains an "indestructible value" and "survives through time and change." (NIUCSEAS)

3D.007

Kitano, H. H. L., & Chai, L. K. (1982). Korean interracial marriage. *Marriage and Family Review, 5*, 75-89.

Refugee/Ethnic Group: Korean; Asian-American

There is a paucity of material on Korean interracial marriage. During our study, we asked a number of Asian Americans their general opinion as to Korean interracial marriage rates, and aside from those who professed ignorance, the other most common response was that it was high, based partially on impressions from Hawaii. Part of the reason for the general ignorance about Korean interracial marriage is the scarcity of written work about the Koreans in general, which in part is based on their relatively small numbers and the newness of their migration. The purpose of this study is to present data on Korean interracial marriage in Los Angeles, the center of the Korean population in the United States. Generalizations concerning the Los Angeles population should be modified for other areas of the country since relative size and the cohesion of an ethnic community are known to be related to the marital patterns of any ethnic group. (POPLINE/AUTHOR)

3D.008

Pakrasi, K. (1965). On some aspects of family structures of the refugees of West Bengal 1947-48. *Sociological Bulletin, 14*, 13-20.

Refugee/Ethnic Group: Bengalese

The partition of Bengal into East and West (East and West Pakistan) led to mass migration of refugees. Through the use of stratified sampling, a survey of 16,156 families was undertaken from May to September of 1948 to study the social and economic condition of the refugees. Family structure and kinship ties are examined. (TAC)

3D.009
Pearson, R. (1982). Understanding Vietnamese in Britain. Part 1: Background and family life. *Health Visitor, 55*, 426-430.

Refugee/Ethnic Group: Vietnamese

The author describes the recent exodus of Vietnamese refugees, their native ethnic country, ethnic origins, languages, characteristics and attitudes towards the UK. Family life is discussed, in particular the importance of the extended, patrilineal family. The status of women, the naming system, the Chinese calendar and the chief festivals are described. (MEDLINE/AUTHOR)

3D.010
Tedeschi, L. G. (1980). Amnesty International and the forgotten prisoner. *American Journal of Forensic Medicine & Pathology, 1*, 277-279.

Refugee/Ethnic Group: General

This article discusses the history, goals, and current activities of Amnesty International, an organization advocating humane treatment and release of political prisoners. The involvement of the medical community is discussed, and suggestions are offered for further involvement. Refugees now harbored by the United States have frequently been the victims of imprisonment and torture. (MEDLINE/TAC)

The following references (identified by their bibliography number) also contain some information relevant to category **3D**:

1A.009, 1A.010, 1A.018, 1A.022, 1A.026, 1A.027, 1A.028, 1A.031, 1A.033, 1A.036, 1A.053

1B.025

1C.022, 1C.066

1D.021

1E.005, 1E.008, 1E.012, 1E.013, 1E.016, 1E.024, 1E.030, 1E.032, 1E.033

2A.007, 2A.019, 2A.026, 2A.031, 2A.044, 2A.047, 2A.073, 2A.079

2B.012, 2B.014, 2B.018, 2B.046, 2B.057

2D.005, 2D.006, 2D.034, 2D.037, 2D.039, 2D.050

2F.019, 2F.022

3A.004, 3A.014, 3A.024, 3A.027, 3A.030, 3A.035, 3A.044, 3A.048

3B.005, 3B.008, 3B.009, 3B.011

3C.003

3E.006

4.002, 4.004

The reader is advised to refer to the above references for more information regarding **Family and Kinship**.

3E. Victims of Torture ...

3E.001
Allodi, F., & Cowgill, G. (1982). Ethical and psychiatric aspects of torture: A Canadian study. *Canadian Journal of Psychiatry, 27*, 98-102.

Refugee/Ethnic Group: Hispanic; Latin-American

Reports the psychiatric findings in a group of 41 Latin American refugees (32 males and 9 females aged 10-46 yrs) who arrived in Canada from 1977 to 1979 and alleged to have been subjected to political persecution and torture under the military rulers of their own countries. Most of them were apprehended violently and imprisoned under conditions below the minimum international standards. Systematic physical and psychological torture was the rule, including blindfolding, beatings, electrical shocks, sexual abuse, and threats of execution or sham executions. These experiences were followed by a cluster of psychiatric symptoms and physical evidence of trauma compatible with the history given (including severe nervousness, insomnia, nightmares, physical damage, depression, and suicide attempts). This pattern constitutes the torture syndrome included under category 308 and 309 of the DSM-III and the International Classification of Diseases 9. The alleged professional conduct of 19 doctors who saw 21 of these patients is discussed. A list of codes of medical ethics, intended to guide and protect doctors confronted with this problem, is included. ((c)APA)

3E.002
Boehnlein, J. K., Kinzie, J. D., Ben, R., & Fleck, J. (1985). One-year follow-up study of posttraumatic stress disorder among survivors of Cambodian concentration camps. *American Journal of Psychiatry, 142*, 956-959.

Refugee/Ethnic Group: Cambodian

One year after receiving a diagnosis of posttraumatic stress disorder, five of 12 Cambodian concentration camp survivors who entered a treatment program no longer met the diagnostic criteria for the disorder, and symptoms in three others had improved. The intrusive symptoms of nightmares, sleep disorders, and startle reactions showed the most consistent improvement. Avoidance behavior, shame, and caring for others improved the least. The authors advocate use of tricyclic antidepressant medication and a consistent, supportive long-term psychotherapeutic commitment in treating this severely traumatized group. (MEDLINE/AUTHOR)

3E.003
Cathcart, L. M., Berger, P., & Knazan, B. (1979). Medical examination of torture victims applying for refugee status. *Canadian Medical Association Journal, 121*, 179-184.

Refugee/Ethnic Group: General

Torture is being increasingly reported. Canada provides a refuge for some of the victims. The medical evidence may be sufficient to give an applicant refugee status. Protocols are presented for the use of physicians in examining applicants for refugee status, and a series of cases is reported in which these protocols were followed. (MEDLINE/AUTHOR)

3E.004

Eitinger, L. (1981). Studies on concentration camp survivors: The Norwegian and global contexts. *Journal of Psychology & Judaism, 6*, 23-32.

Refugee/Ethnic Group: Jewish; Norwegian

Describes Norwegian concentration camp survivors and the fate of the Scandinavian Jews during World War II. The Jewish survivors in Norway are a tiny group with many traits in common with other Jewish survivors, such as loss of families, death sentences, and persistent fear of death. On the other side they have some unique traits, such as favorable economic conditions, return to warm emotional relations, and good social adjustment. In contrast to this group are the survivor refugees who were admitted to Norway on a charitable basis. They were burdened with the fate of refugees, the serious psychic trauma of war, and their somatic illnesses that handicapped them. Even concentrated medical, psychiatric, and social efforts to help them resulted in only short-lived success, because the full impact of their experiences was not understood. It is concluded that the many social, medical, and psychological problems involved make it imperative to convey the message of the Holocaust and its tragic consequences to both scientific workers and the general public. ((c)APA)

3E.005

Gellhorn, A. (1978). Sounding board. Violations of human rights: Torture and the medical profession. *New England Journal of Medicine, 299*, 358-359.

Refugee/Ethnic Group: General

This letter discusses the practice of torture by the government and medical personnel in some areas of the world. Also described is a group of concerned health care workers involved with Amnesty International. A purpose of this group is to prepare a case book on the effects of torture, a publication which may improve the ability of the medical profession to recognize and effectively treat victims who are refugees. (MEDLINE/TAC)

3E.006

Kinsler, F. (1981). Second generation of the Holocaust: The effectiveness of group therapy in the resolution of the transmission of parental trauma. *Journal of Psychology & Judaism*, 6, 53-67.

Refugee/Ethnic Group: General, Jewish

Discusses the importance of sensitizing therapists to the special needs of clients whose parents experienced profound long-term, wartime trauma. The discussion relates to the Holocaust during World War II, but there are other implications for other peoples caught up in terror and cruelty, such as the refugees who preceded them in the late 1930's. Evidence exists to support the hypothesis that transference and countertransference issues relating to survivor guilt in the client and in the therapist have not been sufficiently recognized. The transmission of violence and evil, unwittingly, from one generation to another is elaborated, and attention is given to the short-term group treatment approaches utilized at the Jewish Family Service of Los Angeles to bring awareness to the children of survivors. ((c)APA)

3E.007

Kinzie, J. D. (in press). Severe post-traumatic stress syndrome among Cambodian refugees: Symptoms, clinical course, and treatment approaches. *Disaster stress studies: New methods and findings*. Washington, DC: American Psychiatric Association Press.

Refugee/Ethnic Group: Cambodian

This paper describes the post-traumatic stress syndrome among adult and adolescent Cambodian patients who had survived the Pol Pot concentration camps of the late 1970's. The clients studied were patients at the Indochinese Refugee Clinic sponsored by the Department of Psychiatry of the Oregon Health Sciences University. Several case histories are presented; symptoms include depression, sleep and appetite disturbances, memory avoidance, recurrent nightmares, and recurrent intrusive thoughts. The findings indicate that post-traumatic disorder among these patients is a chronic, relapsing illness with a differential pattern of symptoms, and the vulnerability to further symptoms continuously exists. (TAC/AUTHOR)

3E.008

Kinzie, J. D., Fredrickson, R. H., Ben, R., Fleck, J., & Karls, W. (1984). Posttraumatic stress disorder among survivors of Cambodian concentration camps. *American Journal of Psychiatry*, *141*, 645-650.

Refugee/Ethnic Group: Cambodian

Thirteen Cambodian refugees who had survived 2-4 years of concentration camp experience met the DSM-III criteria for posttraumatic stress disorder. Their predominant symptoms were avoidance, hyperactive startle reactions, emotional numbness, intrusive thoughts, and nightmares, which had lasted at least 3 years after the imprisonment. The patients' avoidance of thoughts or discussion of the past and the shame they felt about Cambodia's history made diagnosis and treatment difficult. These findings give cross-cultural validation to the diagnosis of posttraumatic stress disorder and should alert clinicians to its existence in a population not previously studied. (MEDLINE/AUTHOR)

3E.009

Kinzie, J. D., Sack, W., Angell, R., Manson, S., & Rath, B. (1986). The psychiatric effects of massive trauma on Cambodian children I. The children. *Journal of American Academy of Child Psychiatry, 25*, 370-376.

Refugee/Ethnic Group: Cambodian

This report, using standardized interviews by psychiatrists, describes the psychiatric effects on 40 Cambodian high school students in the United States who suffered massive trauma from 1975 to 1979. They endured separation from family, forced labor and starvation, and witnessed many deaths because of the Pol Pot regime. After 2 years of living in refugee camps, they immigrated to the United States at about age 14. Four years after leaving Cambodia, 20 (50%) developed Post-Traumatic Stress Disorder; mild, but prolonged depressive symptoms were also common. Psychiatric effects were more common and more severe when the students did not reside with a family member. (AUTHOR)

3E.010

Niederland, W. G. (1984). Compulsive gambling and the "survivor syndrome" [letter]. *American Journal of Psychiatry, 141*, 1013.

Refugee/Ethnic Group: General

This letter to the editor discusses the author's experiences in his medical practice in Europe with victims of political and racial persecution. Many of these individuals experienced depressive reactions, one of which was compulsive gambling. (MEDLINE/TAC)

3E.011

Sack, W., Angell, R., Kinzie, J. D., Manson, S., & Rath, B. (1986). The psychiatric effects of massive trauma on Cambodian children II. The family and school. *Journal of the American Academy of Child Psychiatry, 25*, 377-383.

Refugee/Ethnic Group: Cambodian

Forty Cambodian high school students who survived four years under the Pol Pot regime (1975-1979) and 6 Cambodian students who escaped their homeland prior to Pol Pot were studied by means of home interviews and school teacher ratings. In these findings, compared to psychiatric interview data on the same students (Kinzie, et al., 1985), students reported more distress with school grades, peers and themselves than was observed by their caretakers. Many of their family members exhibited similar post-traumatic stress and depressive symptoms. In school, students receiving a psychiatric diagnosis were more likely to be rated by their classroom teachers as withdrawn or daydreaming than as disruptive. The crucial role of the school as a cultural agent of change became stongly evident. (TAC/AUTHOR)

3E.012

Sterba, E. (1968). The effect of persecutions on adolescents. In H. Krystal. (Ed.), *Massive psychic trauma.* (pp. 51-61). New York: International Universities Press.

Refugee/Ethnic Group: European

This paper discusses the traumatic effects of loss and concentration camp life on the emotional development of 25 displaced adolescents (ages 12-20). The differences between adolescent and adult responses to the trauma of the Nazi experience is examined. (TAC)

3E.013

van der Westhuizen, M. (1980). Kampuchean refugees--An encounter with grief. *Australian Nurses Journal, 10,* 53-56.

Refugee/Ethnic Group: Cambodian; Jewish

As the result of a civil war, a communist faction led by Pol Pot came to power in Cambodia in 1975. In 1979, the Vietnamese invaded the country of Kampuchea, as Cambodia came to be called, and drove Pol Pot from power. Many Cambodians were murdered under Pol Pot's regime, and those who survive now find themselves caught in the crossfire between the Vietnamese army and the remnants of the communist forces. Many Cambodians crossed into Thailand to find safety in one of the many refugee camps before Thailand closed its borders. This article discusses the experiences of a health care team working in a "hidden" mountain camp in Cambodia near the Thailand border. Grief reactions observed by the author included: depression, prolonged crying periods, recurrent nightmares, apprehension, psychosomatic manifestations, obsessive rumination over the past, and others. Similarities exist between the experience of the Cambodian refugees and the experiences of the Jewish survivors of the World War II concentration camps. (MEDLINE/TAC)

The following references (identified by their bibliography number) also contain some information relevant to category **3E**:

1B.005

1C.008, 1C.071

2A.011

2F.002

3A.036, 3A.046

3C.001

4.004

The reader is advised to refer to the above references for more information regarding **Victims of Torture, Terror, Concentration Camps, or Rape**.

SECTION 4

OTHER BIBLIOGRAPHIES ON REFUGEES OR RELATED TOPICS

4. Other Bibliographies ...

4.001
Ashmun, L. F. (Ed.). (1983). *Occasional Paper No. 10, Resettlement of Indochinese refugees in the United States: A selective and annotated bibliography.* Dekalb: Center for Southeast Asian Studies, University of Northern Illinois.

Refugee/Ethnic Group: Southeast-Asian

This is an annotated bibliography of over 1000 entries on Indochinese refugees in the United States. Entries include articles, books, scholarly papers, government publications, and works from private organizations. Included is a subject index, and a guide to ordering articles from central ordering agencies (DAI, ERIC, RMC). (TAC)

4.002
Asian Pacific American Research Seminars. (1981). *Selected bibliography on Asian and Pacific American children and families.* Berkely, CA: National Association for Asian and Pacific American Education.

Refugee/Ethnic Group: Vietnamese

This is an annotated bibliography of recent articles, books, and scholarly papers on Asian and Pacific American children and families. Works are divided by topical area, with a primary focus on literature related to the education of Asian/Pacific children. There are four main topical divisions: (1) education; (2) family; (3) mental health; and (4) social issues. Under the category of education, subtopics include achievement, bilingual education and English as a second language, the classroom, materials, research, and school programs. Topics listed under family include the elderly, parent-child interactions, and socialization and acculturation. The section on mental health lists works on attitudes, cognitive development, communication, mental health issues, and personality. The final section on social issues is divided into works on communities, demography, the media, social economic studies, Vietnamese refugees, women, and youth. (NIUCSEAS)

4.003
Bilingual Education Service Center (BESC). (1979). *An annotated bibliography of Indochinese materials.* Indochinese Center for Material Development and Training. Arlington Heights, IL: Author.

Refugee/Ethnic Group: Southeast-Asian; Cambodian; Hmong; Vietnamese

Annotated bibliography of more than 100 entries on Southeast Asian culture and education, produced with the support of the U.S. Office of Education (HEW) and the Illinois State Board of Education-Bilingual Section. Materials are classified by language group (Cambodian, Hmong/Lao, or Vietnamese) and level (K-6, 7-12, or adult). Within each level the materials are alphabetically arranged by title, and cover (1) history, language and culture, (2) classroom books, (3) stories, and (4) teacher's guides. This bibliography was developed to serve as a guide to the materials in the Indochinese Collection of the BESC as of October 1, 1979. (NIUCSEAS)

4.004
Eitinger, L., & Krell, R. (1985). *The Psychological and Medical Effects of Concentration Camps and Related Persecutions on Survivors of the Holocaust.* Vancouver: University of British Columbia Press.

Refugee/Ethnic Group: General

This book contains a bibliographical list of studies of the medical and psychological sequelae of concentration camp incarceration and related persecutions published up to 1984. The material was gathered from all over the world and was hoped to be inclusive of all that has been written on the topic. The major topics include: 1) direct observation of and direct reactions to the concentration camp during imprisonment and immediately after liberation; 2) compensation-rehabilitation issues; 3) physical and psychological effects;4) children as survivors; and 5) the effects on the second generation. (TAC)

4.005
Giordano, J., & Giordano, G. P. (1977). *The ethno-cultural factor in mental health: A literature review and bibliography.* New York: Institute on Pluralism and Group Identity, American Jewish Committee.

Refugee/Ethnic Group: General

Represents an expanded version of the following article: "Ethnicity and Community Mental Health: A Review of the Literature." *Community Mental Health Review 1* (May/June 1976). (NIUCSEAS)

4.006
Frankel, R. (Ed.). (1980). *The resettlement of Indochinese refugees in the United States: A selected bibliography.* Washington, DC: Indochina Refugee Action Center.

Refugee/Ethnic Group: Southeast-Asian

Selected bibliography of more than 175 entries on the resettlement of Indochinese refugees within the U.S. References include books, journal articles, government publications, unpublished papers, and documents from private agencies. Entries are organized under the following topic headings: (1) refugee camps in Southeast Asia, (2) resettlement of Indochinese in the U.S., (3) socioeconomic and cultural adjustment, and (4) refugee program needs. (NIUCSEAS)

4.007
Morishima, J. K., Sue, S., Teng, L. N., Zane, N. W. S., & Cram, J. R. (Eds.). (1979). *Handbook of Asian American/Pacific Islander Mental Health.* Rockville, Maryland: NIMH.

Refugee/Ethnic Group: Asian-American; Pacific-Islander

An annotated bibliography of401 entries, focused on mental health issues of the Asian American/Pacific Islander population. The following topics are included: academic performance and education; assimilation; bilingual and bicultural studies; community mental health; concentration camp experiences of Japanese Americans; delivery of mental health services; demographic information; family structure and communities; generational differences; identity; immigration to the U. S.; interracial marriage; mental health studies; mental illness, personality; prejudice; discrimination; racism; stereotypes; and testing and assessment. (TAC)

4.008
Office of Refugee Resettlement. (1981). *Refugee resettlement in the United States: An annotated bibliography on the adjustment of Cuban, Soviet and Southeast Asian refugees.* Washington, DC: U.S. Dept. of Health and Human Services.

Refugee/Ethnic Group: Cuban; Soviet; Southeast-Asian

The 304 citations included in this bibliography focus on the issues of refugee resettlement in the United States during the last twenty years. The experiences of three major refugee groups (those from the Soviet Union, Southeast Asia, and Cuba), are emphasized. Published literature, papers, and reports generally characterized as research are included. Each citation contains the document's author and title, and publication information; the topic(s) covered; the population group(s) discussed; an annotation; and text information. A subject index is provided. (NIUCSEAS)

4. Other Bibliographies ...

4.009
Olney, D. P. (1981). *A bibliography of the Hmong (Miao) of Southeast Asia and the Hmong refugees in the United States.* Minneapolis: Southeast Asian Refugee Studies Project, Center for Urban and Regional Affairs, University of Minnesota.

Refugee/Ethnic Group: Hmong

This bibliography lists writings about the Hmong people of Laos. They are divided into eight subject areas: (1) general works on Southeast Asia; (2) general Hmong ethnography; (3) specific aspects of Hmong ethnography; (4) linguistic studies of Hmong and Mien; (5) refugee resettlement; (6) journals; (7) Hmong language books; and (8) bibliographies. The majority of the works listed are available at the University of Minnesota, either in the library system or in the special collection being gathered by the SARS Project. The bibliography should be especially helpful to those working with the Hmong refugees and to Southeast Asian scholars. The entire bibliography has been computerized and will be updated periodically. (NIUCSEAS)

4.010
Resource Consultants, Inc. (1980). *Bibliography of ESL/bilingual and employment/vocational materials for Indochinese.* McLean, VA: Author.

Refugee/Ethnic Group: Southeast-Asian

Annotated bibliography of more than 100 entries relating to language and employment/vocational training for Indochinese refugees. Also included are some general references on Indochinese culture, mental health, adjustment, and programs and activities of the federal government. Works cited include books, reports, journal articles, government publications, and unpublished papers. (NIUCSEAS)

4.011
Stein, B. N. (1980). A bibliography on refugees: A selection with comments. *UNHCR: News From the United Nations High Commissioner for Refugees, 4,* 1-6.

Refugee/Ethnic Group: General

Research bibliography of more than 200 entries on refugees within the U.S. and in other countries. References include books, journal articles, congressional and government publications, and documents from private organizations. Entries are organized under the following subject headings: (1) General Historical Works; (2) Theory, Definition, Classification, Typology; (3) Persecution; (4) Asylum and Legal Issues; (5) Refugee Politics and Policies; (6) Flight; (7) Camps; (8)

Resettlement; (9) Adjustment and Assimilation; (10) Behavior and Mental Health; (11) Children; (12) Agencies; and (13) Regional Surveys and Selected Causes. Brief evaluative annotations are included. (NIUCSEAS)

4.012
Stein, B. N. (1981). Documentary note: Refugee research bibliography. *International Migration Review, 15*, 331-393.

Refugee/Ethnic Group: Hmong

An alphabetical listing of over 1500 articles pertaining to refugee research is presented. (HB-SARS/TAC)

4.013
Tajibnapis, P. (1980). *Selected bibliography: Refugees and refugee migration.* New York: Church World Service.

Refugee/Ethnic Group: General

Selected bibliography of more than 700 entries on refugee migration both in the U.S. and in other countries. Documents covered include books, journal articles, periodicals, government publications, congressional hearings, and dissertations. The bibliography is organized according to the following subjects: (1) general refugee theories and historical background, (2) refugee policies and legislation, (3) resettlement of refugees, and (4) refugee adjustment and assimilation. The bibliography is a compilation of existing bibliographies (notably those of Barry N. Stein and John D. Tenhula). The bibliography was produced with the cooperation of the staff of the School of International Affairs at Columbia University. Some citations include very brief evaluative comments. (NIUCSEAS)

4. Other Bibliographies ...

The following reference (identified by the bibliography number) also contains some information relevant to category 4:

1B.021

The reader is advised to refer to the above reference for more information regarding **Other Bibliographies on Refugees or Related Topics.**

Refugee/Ethnic Group Index

(by reference number)

African, 1B.001, 1B.007, 1C.009, 1C.014, 1C.023, 1E.015, 1E.040, 3B.002, 3D.001
[*See also* North African]
Alaskan Eskimo, 1E.004
Angolan, 1B.007, 1C.023, 1D.050, 1E.015, 1E.016, 1E.040, 1E.041
Asian, 1A.048, 1A.055, 1A.057, 1B.001, 1C.003, 1C.009, 1C.012, 1C.032, 1C.037, 1E.045, 2B.050, 2B.051, 2B.054, 2B.055, 2D.035, 2D.036, 2F.009, 2F.012, 3A.010, 3B.002, 3B.010, 3D.001
Asian American, 2A.026, 2B.003, 2B.004, 2B.028, 2B.049, 2B.056, 2B.058, 2B.067, 2B.068, 2B.069, 2D.006, 2D.033, 2D.050, 2D.051, 2F.006, 2F.017, 2F.018, 2F.019, 3D.007, 4.007

Baltic, 1C.006
Bengalese, 1B.025, 1E.024, 3D.008
Black, 1B.005, 1E.004, 2A.015, 2B.001, 2B.004, 2B.056, 2D.003, 2F.017, 3A.016
Burundian, 1B.007

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